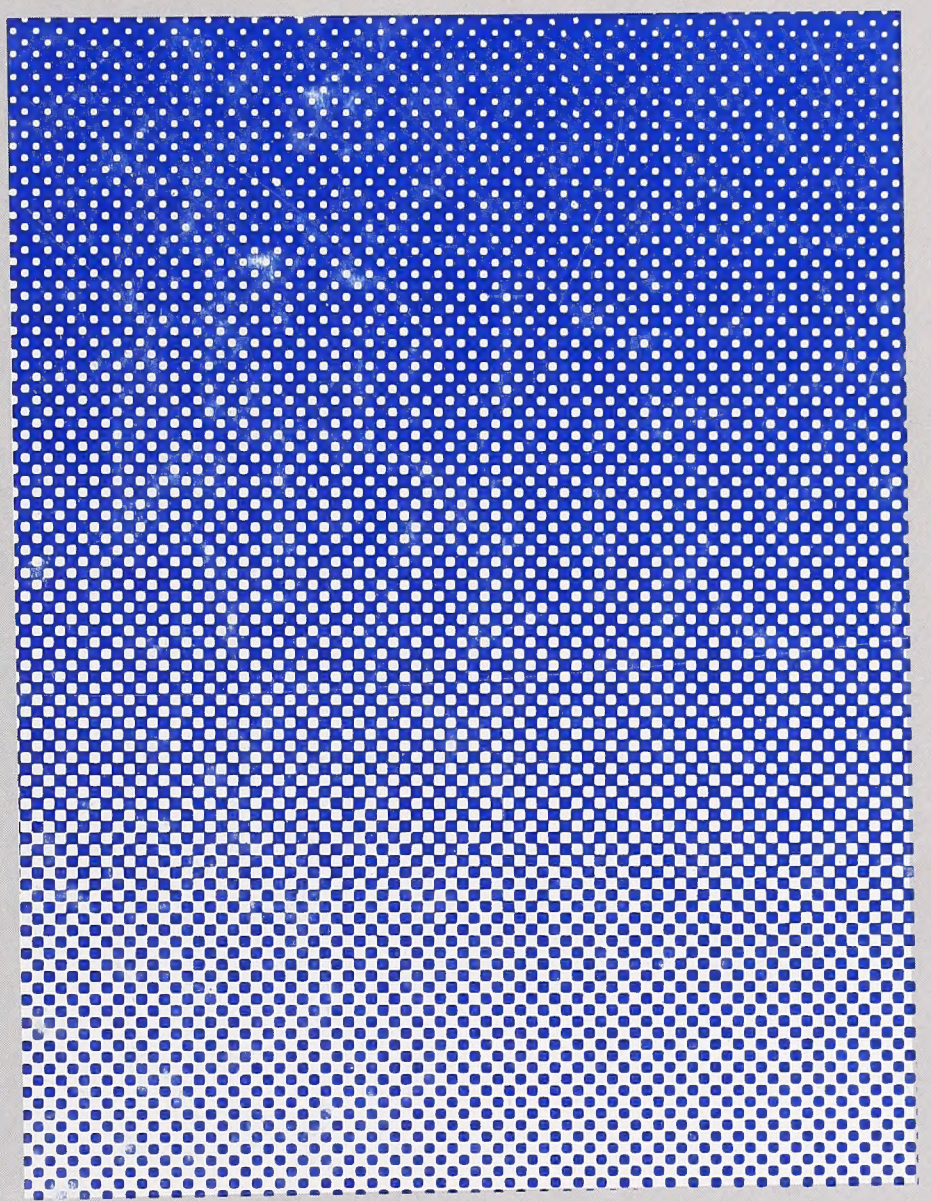
MEDICARE HOSPITAL MORTALITY INFORMATION



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Illinois, Indiana, Michigan

Region V

U.S. Department of Health and Human Services
Health Care Financing Administration

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MEDICARE HOSPITAL MORTALITY INFORMATION

1987

ILLINOIS, INDIANA, MICHIGAN

REGION V

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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

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The Health Care Financing Administration (HCFA) was established on March 9, 1977, to combine health financing and quality assurance programs into a single agency. HCFA is responsible for the Medicare program, Federal participation in the Medicaid program, the Peer Review Organization program and a variety of other health care quality assurance programs.

The mission of the Health Care Financing Administration is to ensure the effective administration of our programs in order to promote the timely delivery of appropriate, quality health care to over 56 million of the nation's aged, disabled and poor. The agency must also ensure that beneficiaries are aware of the services for which they are eligible, that those services are accessible and of high quality, and that agency policies and actions promote efficiency and quality within the total health care delivery system.

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TECHNICAL APPENDIX A-1

INTRODUCTION

The nation's Medicare program, which is administered through the Health Care Financing Administration (HCFA) in the Department of Health and Human Services, now has 31 million beneficiaries. One of HCFA's primary responsibilities is to ensure that Medicare beneficiaries receive quality health care. We believe that the publication of the Medicare hospital mortality information contained in this document will contribute to that end.

This particular information release presents information to answer the question: "What is the actual death rate for each hospital compared to what would have been expected for that particular hospital, given what we know of the characteristics of patients admitted?" The statistics are presented in the hope that they will serve the public and the hospitals in their common interest of improving quality of care.

The development of mortality statistics is a complicated and controversial task, since the mortality rate at a given hospital may reflect, among other factors, age, sex, diagnosis, and severity of illness of patients admitted to that hospital, as well as the purpose and quality of the care they received. Characteristics affecting health and the probability of death vary among the patient populations served by individual hospitals. Consequently, the mortality rates in different patient populations will vary.

The usefulness of this information depends upon the accuracy with which mortality rates can be predicted and the stability of these rates over time for each hospital. It is important to understand that the difference between the hospital's mortality rate and the predicted values in the tables contained in this document may not be a direct measure of the quality of care rendered in hospitals. There is one primary reason for this: we do not now have any direct measurement tool with which we can adjust fully for differences among hospitals in how severely ill their patients are. For instance, two hospitals might have very different death rates for patients admitted for stroke, even after we have adjusted for age and sex. This might happen because one hospital's stroke patients consist of a significant number admitted in a coma and are thus more likely to die, whereas another hospital's patient population represents a broader spectrum of patients with cerebrovascular problems, or because these hospitals in fact provide different levels of quality of care. In addition, other factors affecting the probability of death in a particular case (e.g., family status/support) and overall health status are not included in the predictive model because information on them is not readily available.

When properly understood and used, this information can be useful; it can also be very misleading if it is interpreted incorrectly. The information simply describes one of several possible outcomes at a hospital--post admission mortality for Medicare beneficiaries. The information is not necessarily representative of a hospital's total performance in all aspects of patient care, and is best used to view experience in individual hospitals rather than making comparisons among hospitals. Individual hospitals may have very good reasons for their rates being higher than the ranges predicted by HCFA's model. Accordingly, it was important for hospitals to have an opportunity to review their specific information and to provide comments to HCFA and the public. We asked each hospital to prepare its comments on the information being released to the public, and we are including those comments in this publication.

This information is an important contribution to the health care community and should be reviewed by a wide range of individuals and organizations including hospital administrators, Peer Review Organizations, physicians, and researchers. Among these audiences, perhaps the hospital administrator will find the information most useful--as a screening tool and in consulting with medical staff to evaluate a hospital's strengths and weaknesses. In this way, the information should lead to analysis and subsequent actions which will capitalize on areas of strong performance and strengthen areas where improvement is needed. For example, we expect that hospitals and their medical staffs, using established and newly emerging quality assessment techniques, will try to determine what useful information can be derived about their hospitals and how they function.

Consumers should read the explanations of the uses and limitations of the information, as well as any comments a hospital may have provided, and should consider carefully the different roles that different hospitals play in their community. For example, one hospital might have different death rates than another because it serves more severely ill patients or because it is a trauma or emergency center.

The development and presentation of this information continues to be an important part of HCFA's responsibilities in the health care community. Consequently, in making the information as accurate and useful as possible, over the past several years we have discussed the theoretical framework and statistical approach with a number of nationally recognized technical experts in appropriate fields. Based on their recommendations, we continue to believe that the models used in this work are reasonable and appropriate for the intent of the publication.

This year we made three significant changes in the way in which we presented this information:

- First, we are presenting information for 1986 and 1987. The information for 1986 may be somewhat different from that published last December, since it is based on this year's methodology.

- Second, we are including information about each hospital, such as bed size and other characteristics, which we obtained from data contained in the American Hospital Association's (AHA's) 1987 Annual Survey of Hospitals files or, where such information was not available from the AHA file, HCFA's Medicare/Medicaid Automated Certification System (MMACS) files.

- Third, instead of arranging the hospital mortality information and comments alphabetically by State, we have arranged the States regionally according to HCFA's 10 regional offices.

During our discussions with the experts, it was further recommended that we concentrate our efforts this year on validation of the data. Therefore, we have undertaken the following validation studies targeted to coincide with this year's release of the Hospital Mortality Information:

- HCFA is engaged in a statistical evaluation of the Hospital Mortality Information using clinical data abstracted by MediQual Systems, Inc. from over 40,000 medical records from a carefully selected sample of hospitals. The data consist of clinical characteristics of Medicare patients as ascertained in the first 48 hours of hospitalization, and include data from the patient history and preadmission findings, to permit assessment of the severity of illness at admission and its impact upon mortality. The validation consists of a comparison of the results of the mortality rate analyses with and without the adjustments for patient severity permitted by the specially obtained clinical data. This will allow conclusions about the extent to which patient severity impacts the mortality rates. Hospitals which participated in this study have done so voluntarily. HCFA has shared hospital specific results with each facility from which medical records were abstracted.

- We will be comparing results of the mortality rate analyses with the results found by all Peer Review Organizations (PROs) in applying HCFA's Generic Quality Screens to cases reviewed as a part of ongoing PRO review activities. The purpose of this particular validation effort is to determine the extent to which an alternative presumed measure of quality of care correlates with mortality rates.

In addition, the format for presentation, the process for sharing the information with individual hospitals, and the statistical methodology have been discussed at various meetings with leaders of organizations representing Medicare beneficiaries, physicians, and hospitals. Also, we have spent many months reviewing the comments received from the hospitals during the past 2 years regarding their patient-specific data and our mortality information publication.

Many suggestions from these sources have been incorporated into the final publication. For example, following the release, we examined a limited

number of cases in which hospitals advised us that an individual shown as deceased on HCFA's records was in fact alive. An analysis of specific cases confirmed that there was a report of a date of death in the HCFA data base at the time the Medicare hospital mortality information was being analyzed. In most cases, we found that the source of the date of death in the record was the hospital inpatient bill provided by the facility. For example, the HCFA records showed that a bill submitted by Hospital "X" for an inpatient stay for a patient ending February 12, 1986 indicated the patient status at time of discharge as "Expired." This bill was processed on April 8, 1986 and served as part of the HCFA data base at the time we prepared the release of hospital mortality information. (For Medicare hospital mortality analyses, we used the Medicare billing records received for the June update of the MEDPAR file.) In July 1987, a bill was processed by HCFA for a subsequent hospital stay for this beneficiary and as a result we removed the date of death from our records. Unfortunately, this subsequent information was obtained too late to be included in the final information release. Although this type of billing problem was minimal on a national basis, we hope that an indirect byproduct of this process will be improved accuracy in coding and billing procedures.

The publication of Medicare Hospital Mortality Information is an ongoing process at HCFA. We are continuing to do everything we can to make this information more useful to both the public and the health care professions. We are refining ways to use the information as a screening tool for "quality of care" purposes, and we are developing tools to adjust for differences in disease severity. Thus, this year we provided hospitals with information on the Medicare Mortality Predictor System (MMPS) which is designed to help hospitals interpret the mortality rates of their patients. In addition, because we recognize that mortality rates alone do not adequately measure how effectively a hospital cares for its patients, we will be developing other measures of outcome, such as the need for medical treatment after discharge, to assess the performance of hospitals more fully.

Just as we made improvements in the methodology used last year, we expect that when the 1989 release is published, it, too, will reflect progress toward more accurate and useful information for hospitals, physicians, and consumers alike. This will contribute to assessment of and improvement in the effectiveness of medical services.

William L. Roper M.D.

William L. Roper, M.D.
Administrator

DESCRIPTION OF MORTALITY INFORMATION

Before reading the tables containing the hospital-specific information and the comments provided by individual hospitals, the reader will find it useful to understand the format and presentation of the information in this document.

The analyses of the mortality rates associated with hospitalizations in 1987 are very similar to those carried out last year on Medicare hospitalizations which occurred in 1986. Only one hospitalization for every patient was used--the last hospitalization with a discharge in calendar year 1987. The event evaluated was death within 30 days of admission to the hospital.

For each hospital, information is presented for overall Medicare patient mortality and each of 16 diagnostic categories. The information consists of the number of Medicare patients, the actual mortality rate, and a range of predicted mortality, given the mix of patients.

The reader should note three significant changes in the way the information is organized in this year's publication:

- First, we are presenting information for 1986 and 1987. The information for 1986 may be somewhat different from that published last December, since it is based on the revised methodology discussed below.

- Second, we are including information about each hospital, such as bed size and other characteristics, which we obtained from data contained in the American Hospital Association's (AHA's) 1987 Annual Survey of Hospitals files or, where such information was not available from the AHA file, HCFA's Medicare/Medicaid Automated Certification System (MMACS) files. These hospital characteristics are found at the bottom of each hospital summary page containing the 1986 and 1987 mortality rates and ranges. A more detailed discussion of the hospital characteristics can be found in the section entitled "Hospital Characteristics Definitions."

- Third, instead of arranging the hospital mortality information and comments alphabetically by State, we have arranged the States regionally according to HCFA's 10 regional offices. Thus, the hospital information and comments are arranged alphabetically by State within each State's respective regional volume. A complete listing of States by region (and volume) can be found at Table 1.

Before reviewing the summary table for your hospital, it would be helpful to describe how the numbers were derived and what they mean:

- Number of Cases. This figure is the number of individual Medicare beneficiaries whose last discharge from a short term, acute care hospital in a calendar year was from the hospital listed. The total number for each hospital is presented under the category "all cases."

Similarly, for each diagnostic category, the number of cases consists of the number of Medicare beneficiaries whose last discharge in the calendar year was from the hospital cited and whose principal diagnosis at admission fell within the specific diagnostic category.

Since only a patient's last hospital discharge (including death occurring in a hospital) is "counted" in the total number, HCFA's computation and that maintained by individual hospitals will generally differ. For example, if John Doe was a patient at Hospital A three times during 1987, the methodology used in HCFA's analysis counts only the last discharge in 1987 in the hospital's total. Normally, a hospital maintains statistics regarding each of its admissions and so would count Mr. Doe as three cases. In addition, in this example, if Mr. Doe were admitted later in the year to Hospital B (another acute care hospital) and then discharged in 1987, and this latter stay represented his last discharge for 1987, his case would be counted in Hospital B's total and he would not appear at all in Hospital A's count.

The key factor to remember is that we are examining last hospital discharges in 1987. In some cases, this will necessitate the inclusion of certain patients admitted to the hospital in 1986 or who died in January 1988.

- Actual Mortality Rate. This figure presents the percentage of each hospital's Medicare patients who died within 30 days of the admission that resulted in the last-occurring discharge of the patient in 1987. (The percentage is rounded to the nearest whole percentage point.)

  Where, for example, Hospital A had a universe of 1000 patients whose last acute care hospital discharge in 1987 was from Hospital A, and 100 of these patients died within 30 days of their admission, whether as hospital inpatients or after discharge, the actual mortality rate would be 10 percent. This rate includes cases in which a beneficiary was admitted to the hospital in 1986 and was discharged in 1987. It also includes those instances in which a beneficiary was discharged in 1987 and died within 30 days of admission, even though the 30-day period extends into 1988. Cases in which the beneficiary was not discharged in 1987 are not part of the rate. For example, a person who was admitted to a hospital on December 28, 1987, discharged on January 5, 1988 and died on January 8, 1988 would not be a part of the calculation, even though that person died within 30 days of a 1987 admission.

- Range for Predicted Mortality. This column gives an estimate of mortality rates for cases equal in number and with the average characteristics of the cases treated by the hospital. The range is derived in part by determining, based on national experience, the contribution to the probability of dying associated with various patient characteristics: the number of high, low, and undefined risk hospital admissions in the previous six months, transfer status, age, sex, and presence of up to four of eight possible comorbid conditions--cancer, chronic cardiovascular disease, cerebrovascular degeneration/chronic psychosis, chronic pulmonary disease, chronic renal disease, chronic liver disease, diabetes, hypertensive disease--and

by applying weights of the risk factors to the actual number of patients at the hospital to enable compilation of an expected mortality rate. This rate is converted, with adjustment for the variability expected given the number of cases, to a range of predicted mortality rates. It is important to note that the fewer the number of cases included in a given diagnostic category, the greater the uncertainty of the expected mortality range and, therefore, the wider the range. A larger number of cases yields greater precision, and therefore, a more narrow range of predicted mortality rates.

The principal source of data for the analysis was the HCFA Medicare Provider Analysis and Review (MEDPAR) file which contains information about each Medicare hospital discharge. Information about beneficiaries, including date of death, was obtained from the Social Security Administration.

The analyses were performed by means of logistic regression, with patients grouped into 17 distinct diagnostic categories: ten high risk and six low risk and one category containing all others. Similar to last year, the risk factors (covariates) included in the regression analyses within each diagnostic category were age, sex, significant comorbidities, number of admissions by risk category within 6 months, and status as a transfer patient. However, in response to comments on last year's definition of the diagnostic categories, the present categories are more risk-homogeneous. That is, the mortality rates associated with the ICD-9-CM codes for the principal diagnoses were evaluated and were used to determine whether a code should be placed in the high risk, the low risk, or the "undefined" category. Consequently, while the diagnostic categories still follow medical disciplinary lines, the range of mortality rates in each diagnostic category is more restricted. The net result is that the 16 specifically defined categories now account for about 65 percent of the patients, compared to 70 percent last year, and for about 72 percent of deaths, compared to 80 percent last year. A list of the ICD-9-CM codes used in each diagnostic category is attached in Table 2 and the list of the comorbidities is attached in Table 3. In the process of making these adjustments in the diagnostic categories, we have also modified the names of five categories to reflect more accurately their composition. These changes are: Neuropsychiatric/Sensory Disease (formerly Opthalmologic Disease), Musculoskeletal/Skin Conditions (formerly Orthopedic Disorders), Renal Failure (formerly Renal Disease), Infectious Disease (formerly Sepsis) and Cerebrovascular Accidents (formerly Stroke).

HOSPITAL COMMENTS

On September 15, 1988, HCFA mailed to each hospital its own mortality information and asked for comments by October 24, 1988. Each hospital's comments, if any, immediately follow its mortality information. The comments are generally reproduced as submitted by the hospital. However, some hospitals returned to HCFA an annotated copy of the information sent on September 15. These annotated materials have not been reproduced in this publication.

even in those instances where they were the only form of comments submitted by a hospital. The reason for not printing these materials is one of privacy or because it would result in duplication of characteristics already corrected by HCFA. Information which would identify or possibly identify patients must be deleted, which would cause any remaining information to be of extremely limited, if any, use. Therefore, we have included a statement to identify instances when these types of materials have not been included. Other hospitals submitted comments that were more lengthy than those which we specified in our September 15 letter would be permitted and, therefore, were edited. As mentioned earlier, it is extremely important that the information presented in the tables be reviewed in concert with the hospital's comments.

In any project of this size, there will be instances where hospitals did not receive the information for comment or did not receive it timely. In fact, many hospitals were sent second copies of their specific information in an expeditious manner to allow every opportunity for review and comment. Therefore, even though it is possible that some of the nonresponding facilities never got the information or did not have adequate time to comment, we expect that these instances were few in number.

INFORMATION SOURCES AND NOTES

It is important to note that this publication is based primarily on Medicare hospital billing information for calendar years 1985, 1986, and 1987. While the principal source for the analysis was the HCFA-maintained MEDPAR file which contains information about each Medicare hospitalization, some of the information about beneficiaries, such as date of death, was obtained from the Social Security Administration. Hospitals submit such information to HCFA's fiscal intermediaries (which handle claims for the care provided to Medicare beneficiaries). The file is updated quarterly. It is estimated that billing information on approximately 95 percent of all Medicare discharges is included in the MEDPAR file within 6 months of the close of the calendar year. Accordingly, our analysis was based on information received through June 10, 1988.

In any large-scale data base such as one dealing with Medicare hospitalizations, there will be gaps or inaccuracies. The fact that the files contain information on about 10 million hospital admissions to nearly 6,000 hospitals for each year provides some assurance that, for purposes of the statistical analysis conducted here, the information which might be missing or inaccurate is such a small portion of the total that it would have almost no impact on the results.

Nonetheless, while we feel that the information used in this analysis is quite thorough and complete, there are a few points which should be kept in mind as the hospital-specific information is being reviewed:

- The information used is billing data and is only as good as the information submitted by hospitals as a part of the payment process. Although there is always a possibility that coding errors are included, for our purposes here, it is assumed that, given the link to payment, hospitals have an incentive to submit bills accurately and promptly.

- The hospitals included in this analysis are short-term, acute care facilities which were identified by their unique provider number. All facilities which have a zero in the third position of their provider number are by definition participating in Medicare as short-term, acute care facilities. All other facilities--those with something other than a zero in the third position of the provider number--were excluded from the analysis. In some cases, hospital names suggest an orientation different from acute care. This does not mean the facility is inappropriately included in the publication.

- There is some information in the file which does not reflect the results of review by Peer Review Organizations (PROs), the entities charged with reviewing hospital services provided to Medicare beneficiaries. For example, one of the functions a PRO performs is to ensure that the diagnosis assigned to a particular case is accurate. The nature of the review and payment system is such that it is possible that PRO changes in diagnosis assignment may not be submitted to HCFA and associated in the MEDPAR file on as timely a basis as other billing information. Obviously, any major changes in diagnosis assignment which are not reflected in the data base would have a bearing on calculation of mortality rates in individual diagnostic categories and may also have a bearing on comorbidities. Some hospitals pointed out instances where the hospital's mortality information did not agree with HCFA's; e.g., different date of death, cases of subsequent admission to another facility, or changes in diagnostic codes. The data base used in this analysis has not been revised to reflect these potential discrepancies. Rather, we are examining all hospital comments to ensure that changes to our data systems and processes can be made when warranted so that future releases will be even more accurate. Readers are urged to review any hospital comments with a specific view toward these types of issues.

- The predictive model used in this effort does not explain all variability in outcome. Most notably, a measure of severity of illness has not been included in the model, and, therefore, the predictive power of the model is less precise than it would be if such a measure had been available. Nonetheless, the information included in this document does legitimately contribute to the body of information about hospital performance.

HOSPITAL CHARACTERISTICS DEFINITIONS

In this year's publication, we have included hospital characteristics information such as bed size, occupancy rate, ownership, staffing, and specialty services. This information was obtained from the American Hospital Association (AHA) 1987 Annual Survey of Hospital Files. Where hospitals did not provide information on a particular item, it has been listed as "not available." This file consists of information voluntarily reported by hospitals to the AHA. In instances where the AHA records contained no information about a hospital included in the analysis, we have presented the most recent information from HCFA's Medicare/Medicaid Automated Certification System (MMACS) Files.

Following are the AHA's definitions of each characteristic found on the hospital's summary page containing the 1986 and 1987 mortality rates and ranges.

SURVEY AND YEAR: AHA 1987	Source = American Hospital Association 1987 Annual Survey of Hospital Files
o Total beds (#):	Number of beds (including sub-acute beds), cribs, and pediatric and neonatal bassinets regularly maintained (set up and staffed for use) for inpatients as of the close of the reporting period; does not include bassinets for normal newborn infants.
o Occupancy rate (%):	Ratio of average daily census to the average number of beds (statistical beds) maintained during the 12-month reporting period. (NOTE: The number of these "statistical beds" may differ from the bed count at the close of the reporting period.)
o Ownership/control:	State government, local government, district/authority, church, private nonprofit, private for profit, or Federal Government
STAFFING:	
o Total number of physicians:	Total active and associate medical staff
o Percent of Board-Certified Specialists	Physicians who have passed an examination given by a medical specialty board and have been certified by that board as a specialist.
o Interns and residents:	Full-time equivalent (FTE) medical residents
o Registered nurses:	Full-time equivalent (FTE) registered nurses
o Licensed practical nurses:	Full-time equivalent (FTE) licensed practical nurses

SPECIALTY SERVICES:

o Shock/trauma unit:	Provides emergency and specialized intensive care to critically injured patients.
o Burn unit:	Provides more intensive care to severely burned patients than the usual acute nursing care provided in medical and surgical units. Beds must be set up and staffed in a unit specifically designated for this service.
o Medical/surgical intensive care:	Provides nursing care to adult and/ or pediatric patients of a more intensive nature than the usual medical, surgical, pediatric, and/or psychiatric care on the basis of physicians' orders and approved nursing care plans. Included are medical-surgical, pediatric, and psychiatric (isolation) units. These units are staffed with specially trained nursing personnel and contain monitoring and specialized support equipment for patients who, because of shock, trauma, or life-threatening condi- tions, require intensified, compre- hensive observation and care. These units may also include cardiac care when such services are not provided in a distinct cardiac care unit.
o Cardiac intensive care:	Provides patient care of a more specialized nature than the usual medical and surgical care, on the basis of physicians' orders and approved nursing care plans. The unit is staffed with specially trained nursing personnel and contains monitoring and specialized support or treatment equipment for patients who, because of heart seizure, open-heart surgery, or other life-threatening conditions, require intensified, comprehensive observation and care. May include myocardial infarction, pulmonary care, and heart transplant units. Beds must be set up and staffed in a unit(s) specifically designated for this service.

o Organ transplant service	The necessary staff and equipment to perform the surgical removal of a viable human organ (including kidney) from a donor, either alive or just deceased, and the surgical grafting of the organ to a suitably evaluated and prepared patient.
o Hospice care:	A program providing palliative care, chiefly medical relief of pain and supportive services, to terminally ill patients and assistance to their families in adjusting to the patient's illness and death.

NOTE: Inquiries regarding the AHA data or requests for additional AHA data must be directed to the Director of the American Hospital Association's Hospital Data Center at (312) 280-6000.

Following are HCFA's Medicare/Medicaid Automated Certification System (MMACS) definitions of each characteristic found on the hospital's summary page containing the 1986 and 1987 mortality rates and ranges. Please note that there are no specific definitions of the specialty services in MMACS, and the characteristics that appear are those reported by the hospital.

SURVEY AND YEAR: HCFA 19_	Source = Health Care Financing Administration MMACS Files
o Total beds (#):	Total number of operational beds eligible for Medicare reimbursement.
o Ownership/control:	Church; private; Federal, State, local government, or hospital district or authority; proprietary.
STAFFING:	
o Interns and residents:	Full-time equivalent (FTE) medical residents
o Registered nurses:	Full-time equivalent (FTE) registered nurses
o Licensed practical nurses:	Full-time equivalent (FTE) licensed practical nurses

o	Organ transplant service:	The necessary staff and equipment to perform the surgical removal of a viable human organ (including kidney) from a donor, either alive or just deceased, and the surgical grafting of the organ to a suitably evaluated and prepared patient.
o	Hospice care:	A program providing palliative care, chiefly medical relief of pain and supportive services, to terminally ill patients and assistance to their families in adjusting to the patient's illness and death.

Table 1

STATES BY REGION	LOCATION OF HCFA REGIONAL OFFICE
Connecticut Maine Massachusetts New Hampshire Rhode Island Vermont	Boston(I)
New Jersey New York Puerto Rico Virgin Islands	New York(II)
Delaware District of Columbia Maryland Pennsylvania Virginia West Virginia	Philadelphia(III)
Alabama Florida Georgia Kentucky Mississippi North Carolina South Carolina Tennessee	Atlanta(IV)
Illinois Indiana Michigan Minnesota Ohio Wisconsin	Chicago (V)
Arkansas Louisiana New Mexico Oklahoma Texas	Dallas (VI)

Table 1 (Cont.)

STATES BY REGION	LOCATION OF HCFA REGIONAL OFFICE
Iowa Kansas Missouri Nebraska	Kansas City(VII)
Colorado Montana North Dakota South Dakota Utah Wyoming	Denver(VIII)
American Samoa/Guam Arizona California Hawaii Nevada	San Francisco(IX)
Alaska Idaho Oregon Washington	Seattle(X)

Table 2

DIAGNOSTIC CATEGORY	ICD-9-CM CODES
High Risk	
Cancer	141, 147, 150-151, 156-159, 162.2-164, 171.5, 171.8, 171.9, 172.8, 179, 180.9 183, 189.0, 191, 192.2, 195, 196.1-196.2, 196.8, 197.0-197.2, 197.4-197.8, 198.0- 198.1, 198.3-198.8, 199-208
Cerebrovascular Accidents	430-432, 433.0, 434, 436
Severe Acute Heart Disease	410, 415, 421.0, 421.9, 423.0-423.2, 427.4-427.5, 441.0, 441.1, 441.3, 441.5, 444.1, 447.2, 785.5
Severe Chronic Heart Disease	397, 398.91, 416, 425.0, 425.2-425.4, 426.89, 428, 429.5-429.9, 441.2, 442.2, 453.2
Gastrointestinal Catastrophes	452, 453.0, 456.0, 456.20, 530.4, 530.8, 531.1-531.2, 531.5-531.6, 532.1-532.2, 532.5-532.6, 533.1-533.2, 533.5-533.6, 534.1-534.2, 534.5-534.6, 551, 557.0, 558.2, 560.0, 560.2, 560.89, 567, 569.83, 570, 571.2, 571.5-571.6, 572.2-572.4, 572.8
Metabolic/ Electrolyte Disorders	250.2-250.3, 260-263, 273, 275.4, 276.0, 276.2, 276.4-276.5, 277.3
Pulmonary Disease	481, 482.0-482.1, 482.3-482.9, 485-486, 500-505, 507, 508.0, 510, 511.1-511.9, 512-516.0, 518.0-518.1, 518.4, 518.5, 519.2-519.3
Renal Failure	584-586
Infectious Disease	018, 027.0, 036, 038, 040, 046-048, 049.0-049.1, 054, 060, 070.0, 070.2, 070.4, 070.6, 112, 116-117, 136.3, 320-320.7
Severe Trauma	806.0-806.1, 807.4, 851-853, 861.0-861.1, 861.3, 864, 868-869, 875.1, 901-902, 933.1, 934, 946.3-946.5, 948.4-948.9, 958.4

Table 2 (cont.)

DIAGNOSTIC CATEGORY	ICD-9-CM CODES
Low-Risk	
Neuropsychiatric/Sensory Disease	290-292, 293.1-293.9, 294-309, 311-319, 331.1-331.9, (excluding 331.7), 332-334 (excluding 334.4), 337 (excluding 337.1), 340, 342-343, 344.2-344.9, 345.0-345.2, 345.4-345.9, 346-347, 348.0, 350-358 (excluding 357.1-357.4 and 358.1), 360-389
Gynecologic Disease	614-627 (excluding 619.1)
Low-Risk Heart Disease	390, 393, 401, 402.00, 402.10, 402.90, 405, 411.1-411.8, 413-414, 417, 420.9, 422.9, 425.1, 426.1-426.7, 426.81, 427.0, 427.2-427.3, 427.6, 427.8-427.9, 429.4, 433.1-433.9, 435, 437.2, 442.0-442.1, 442.3-442.9, 447.0-447.1, 447.3-447.9, 448, 451, 453.1, 453.8-453.9, 454-455, 456.3-456.6, 457.0-457.1, 457.9, 458.0
Gastrointestinal Disease	520-527, 528.2, 528.4-528.9, 529, 530.0-530.3, 530.5-530.7, 530.9, 531.3, 531.7-531.9, 532.3, 532.7-532.9, 533.3, 533.7-533.9, 534.3, 534.7-534.9, 535-536, 537.1-537.2, 537.5-537.6, 537.81, 537.9, 540-543, 550, 552, 558.1, 558.9, 562-566, 568, 569.0-569.2, 569.4-569.6, 569.9, 571.8-571.9, 574.00, 574.10, 574.20, 574.30, 574.40, 574.50, 575.0-575.3, 575.5-575.6, 575.9, 576.0, 576.9, 577.1, 577.9, 579
Urologic Disease	582-583, 588-589, 590.1, 590.8-590.9, 592, 594-595, 596.0, 596.2-596.5, 596.7-596.9, 597-598, 599.1-599.9, 600-606, 607.0-607.1, 607.3-607.9, 608.0-608.3, 608.8-608.9

Table 2 (cont.)

DIAGNOSTIC CATEGORY	ICD-9-CM CODES
Musculoskeletal/Skin Conditions	680-686, 690-698, 700-706, 707.1-707.9, 708-709, 710.0, 710.2-710.9, 714.0-714.4, 714.89, 714.9, 715-744, 746-758, 800.0, 800.5, 801.0, 801.5, 802, 805, 806.2-806.9, 807.00-807.06, 807.1-807.3, 807.5-807.6, 808-819, 822-838, 839.1-839.9, 840-848, 850, 854.00-854.04, 854.06-854.09, 861.2, 862, 867.1, 867.3-867.9, 870-874, 875.0, 876-887, 890-897, 905-929

The number of digits in the code indicated is important in identifying the included diagnoses. If a 3 digit code is given, all diagnoses with the first three digits indicated are included. Thus, if there is a 4th and 5th digit subclassification for the code, diagnoses with these 4th and 5th digits are included.

If a 4 digit code is given, all diagnoses with the first four digits indicated are included. Additionally, if there is a 5th digit subclassification for the code, the diagnoses with the first four digits indicated and any of the 5th digits are included. Codes specified to the 5th digit were defined with greater clinical detail and include only that diagnosis.

Where a range of codes are specified (such as 290-292) all diagnoses through 292 are included. The rules for interpreting what is included in the 3 digit code of 292 are indicated above.

Table 3

COMORBIDITY	ICD-9-CM CODES
Cancer	141-160.9, 162-172.9, 174-208.9
Chronic Liver Disease	571-572.8
Chronic Renal Disease	582-583.9, 585-587
Chronic Cardiovascular Disease	412-414.9, 426-429.1
Chronic Pulmonary Disease	491-493.9, 496
Cerebrovascular Degeneration/ Chronic Psychosis	290-290.9, 294-299.9
Hypertensive Disease	402-405.99
Diabetes	250.01, 250.1-250.9

(A comorbidity is taken to be present if its ICD-9-CM code appears on the bill as any one of the up to four additional diagnoses beyond the principal diagnosis.)

ABRAHAM LINCOLN MEMORIAL HOSPITAL

315 8TH ST
LINCOLN, IL 62656

Medicare Hospital Provider Number: 140004

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	688	15	10 - 16	724	14	9 - 16
Cancer	17	53	19 - 65	10	60	22 - 78
Cerebrovascular Accidents	37	41	12 - 44	19	26	12 - 52
Gastrointestinal Catastrophes	4	25	4 - 80	6	50	12 - 79
Infectious Disease	7	43	8 - 73	10	40	14 - 70
Metabolic/Electrolyte Disorders	8	0	3 - 51	11	9	7 - 52
Pulmonary Disease	51	20	15 - 40	66	21	13 - 36
Renal Failure	3	67	5 - 88	3	33	3 - 87
Severe Acute Heart Disease	29	55	23 - 59	24	54	20 - 59
Severe Chronic Heart Disease	52	31	15 - 41	59	37	13 - 39
Severe Trauma	3	33	3 - 86	0	-	-
Gastrointestinal Disease	54	4	0 - 20	67	3	1 - 14
Gynecologic Disease	11	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	68	3	0 - 15	61	3	1 - 15
Musculoskeletal/Skin Conditions	65	3	0 - 24	66	2	1 - 11
Neuropsychiatric/Sensory Disease	22	5	0 - 88	33	3	0 - 47
Urologic Disease	34	6	0 - 89	34	3	0 - 35

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	86
Occupancy Rate (%):	44
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	18
Percent of Physicians Who Are Board Certified Specialists:	50
Interns and Residents:	0
Registered Nurses:	59
Licensed Practical Nurses:	22

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

ALEXIAN BROTHERS MEDICAL CENTER

800 W BIESTERFIELD RD
ELK GROVE VILLAGE, IL 60007

Medicare Hospital Provider Number: 140258

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,642	11	11 - 16	1,687	11	11 - 16
Cancer	70	47	33 - 59	81	58	35 - 61
Cerebrovascular Accidents	68	24	19 - 41	50	20	17 - 41
Gastrointestinal Catastrophes	25	44	20 - 60	23	22	21 - 59
Infectious Disease	13	23	17 - 63	15	33	26 - 73
Metabolic/Electrolyte Disorders	36	42	17 - 53	38	29	15 - 48
Pulmonary Disease	88	25	21 - 42	64	14	16 - 36
Renal Failure	7	29	9 - 77	6	50	12 - 84
Severe Acute Heart Disease	66	20	27 - 49	65	31	29 - 53
Severe Chronic Heart Disease	89	7	16 - 29	84	12	16 - 32
Severe Trauma	1	100	1 - 97	7	0	9 - 58
Gastrointestinal Disease	119	3	1 - 10	137	2	1 - 8
Gynecologic Disease	18	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	214	3	2 - 7	235	4	1 - 8
Musculoskeletal/Skin Conditions	130	3	1 - 9	126	7	1 - 13
Neuropsychiatric/Sensory Disease	43	2	0 - 23	63	3	1 - 16
Urologic Disease	95	1	0 - 11	74	1	1 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	375
Occupancy Rate (%):	72
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	378
Percent of Physicians Who Are Board Certified Specialists:	86
Interns and Residents:	1
Registered Nurses:	278
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

ALEXIAN BROTHERS
Medical Center

October 26, 1988 Provider #140258

Mrs. Sandra Kappert
Health Care Financing Administration
Health Standard and Quality Bureau
2-D2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21202

Dear Mrs. Kappert:

After reviewing the Medicare Mortality Information presented by the Health Care Financing Administration, several areas of concern are present and must be brought to your attention:

1. The hospital characteristics data is incorrect. Alexian Brothers Medical Center is licensed for 477 beds, not 164 as stated in the characteristics. Additionally, Alexian Brothers Medical Center does maintain a coronary care unit which is not reflected in the specialty services section of the report.

2. The data does not reflect a fair and valid sample. In the one area (severe trauma) that Alexian Brothers Medical Center exceeded the range for predicted mortality, the sample of cases was only one (1) case. It is unfair to publish such data to a public who may interpret the data incorrectly.

3. In publishing this data HCFA must be sure to inform the public that mortality data is not a complete measure of quality of care and that some hospitals with inpatient hospice units (such as Alexian Brothers Medical Center) voluntarily give quality of care to the terminally ill and help them prepare for death.

4. Severity of illness is omitted from the data. The categories of illness are too broad. For example, certain forms of cancer are less likely to terminate in death than are others. Yet the implication seems to be that all cancers end in death.

5. The mortality data includes deaths that may be unrelated to the condition of a patient at discharge. A patient dies of a heart attack at home after discharge from the hospital for a urologic disorder yet the cause of death is attributed to the diagnosis at the last discharge.

6. The delivery of quality care is the highest priority at Alexian Brothers Medical Center. That quality of care is monitored through the peer review process aand a comprehensive quality management program. Quality of care should be the basis upon which an individual selects a hospital for their health care needs. Reporting mortality rates exclusively makes what is only a part of the picture become a total picture. The public, then, receives distorted information about a hospital. This can lead to uncalled for fears and incorrect conclusions and perceptions.

7. The sample focuses on the medicare population, which is only a portion of the total population serviced by a hospital. This is a population that has special health care needs. The health status of this population is compounded by advanced age as well as many pre-existing health conditions. However, the public is being led to make a judgement based upon a small compromised population (1,642 medicare deaths out of 13,000 patients cared for in one (1) year at Alexian Brothers Medical Center). This is unfair not only to the hospital but to the public as well.

Alexian Brothers Medical Center would appreciate the consideration given to the points addressed in this letter.

Sincerely,

Brother Philip Kennedy

Brother Philip Kennedy
President/Chief Exeuctive Officer

ALTON MEMORIAL HOSPITAL

ONE MEMORIAL DRIVE
ALTON, IL 62002

Medicare Hospital Provider Number: 140002

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,239	11	9 - 14	1,251	9	8 - 13
Cancer	41	29	26 - 56	41	34	25 - 56
Cerebrovascular Accidents	57	26	17 - 41	36	22	14 - 43
Gastrointestinal Catastrophes	6	17	12 - 74	7	57	11 - 75
Infectious Disease	8	38	10 - 71	9	33	12 - 70
Metabolic/Electrolyte Disorders	14	43	8 - 60	19	16	8 - 47
Pulmonary Disease	66	23	13 - 36	53	21	10 - 35
Renal Failure	6	50	19 - 91	1	100	3 - 98
Severe Acute Heart Disease	51	45	24 - 53	59	37	27 - 53
Severe Chronic Heart Disease	55	24	11 - 35	54	15	13 - 34
Severe Trauma	1	100	0 - 97	4	25	6 - 81
Gastrointestinal Disease	128	2	1 - 9	122	5	1 - 12
Gynecologic Disease	12	8	0 -100	14	0	0 -100
Low-Risk Heart Disease	141	3	1 - 8	134	3	1 - 9
Musculoskeletal/Skin Conditions	170	3	0 - 9	171	0	1 - 4
Neuropsychiatric/Sensory Disease	19	0	0 - 87	32	0	0 - 47
Urologic Disease	63	3	0 - 33	42	0	0 - 23

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	278
Occupancy Rate (%):	46
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	108
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	124
Licensed Practical Nurses:	48

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

AMERICAN INTERNATIONAL HOSPITAL

SHILOH BLVD AND EMMAUS AVE
ZION, IL 60099

Medicare Hospital Provider Number: 140100

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	176	15	8 - 19	200	14	7 - 18
Cancer	9	33	15 - 72	5	20	12 - 79
Cerebrovascular Accidents	4	50	4 - 82	4	25	3 - 80
Gastrointestinal Catastrophes	1	0	1 - 97	2	0	4 - 89
Infectious Disease	5	40	11 - 82	5	20	7 - 75
Metabolic/Electrolyte Disorders	0	-	-	6	17	4 - 69
Pulmonary Disease	17	53	14 - 60	23	39	9 - 49
Renal Failure	0	-	-	3	67	4 - 87
Severe Acute Heart Disease	6	67	12 - 77	5	40	9 - 79
Severe Chronic Heart Disease	5	40	3 - 77	10	30	4 - 61
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	11	0	0 - 94	11	0	0 - 94
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	21	5	0 - 52	29	3	1 - 28
Musculoskeletal/Skin Conditions	26	0	0 - 88	40	0	0 - 89
Neuropsychiatric/Sensory Disease	4	0	0 -100	3	0	0 -100
Urologic Disease	10	0	0 -100	6	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	95
Ownership/Control:	Private, For Profit

STAFFING

Interns and Residents:	0
Registered Nurses:	105
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

American International Hospital
Shiloh Boulevard
& Emmaus Avenue
Zion, Illinois 60099
Telephone: 312.872.4561

October 18, 1988

Health Standards & Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Buidling
6325 Security Blvd.
Baltimore, MD 21207

Dear Mr. Roper:

Thank you for sending your gathered statistics to our facility for review. We would like to respond with the following four comments:

1. We agree with all the statistics gathered in the report, however, we feel the actual presentation and/or layout of the statistics is misleading. We would recommend the following:

   a. Under "Cases", specify this figure represents all discharges during 1987, alive and expired.
   b. List the number of deaths in each category in a separate column next to the cases.
   c. State these deaths were all within 30 days of admission.

2. Our actual deaths of the 176 patients were 26, or 15%. Of these 26 deaths, the following should be noted:

   a. 21 patients expired while in-house or 81%.
   b. 5 patients expired after discharge but within 30 days of admission.

3. Of the 21 patients who died in-house (2a):
   a. "No Code" status at time of death - 15 or 71%.
   b. Patients expiring as code status - 6 or 29%.

   Of the 6 with Code Status (3b): Cardiac Arrest - 5 or 83%
   Respiratory Arrest - 1 or 17%

Health Standards & Quality Bureau, CHFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Blvd.
Baltimore, MD 21207

4. As for the five (5) patients discharged alive, but expired within 30 days of the admission:

   1- Final diagnosis of CA of Prostate with Mets to Spine.
   2- Final diagnosis of Multiple Myeloma. Patient no code and transferred to Nursing Home.
   3- Final diagnosis of CA of Liver. No Code and transferred to Nursing Home.
   4. Final diagnosis of Myocardial Infarction, with Pacemaker. Patient stabilized and was transferred to Nursing Home.
   5. Final diagnosis of Thrombocytopenia. Patient was No Code on discharge.

This report was compiled in joint effort by Utilization Review, Medical Records and Administration. Thank you for the opportunity to respond.

Sincerely,

Stephen Weinstein
Executive Vice President

SW/bks

ANDERSON HOSPITAL

ILL RT 162 OLD EDWARDSVILLE R
MARYVILLE, IL 62062

Medicare Hospital Provider Number: 140289

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,082	16	12 - 17	1,100	14	10 - 16
Cancer	29	31	25 - 60	19	53	17 - 61
Cerebrovascular Accidents	59	24	17 - 40	48	50	16 - 45
Gastrointestinal Catastrophes	13	31	15 - 65	11	45	11 - 67
Infectious Disease	8	25	14 - 71	15	27	15 - 61
Metabolic/Electrolyte Disorders	19	37	13 - 57	7	14	7 - 65
Pulmonary Disease	96	34	19 - 41	76	28	17 - 39
Renal Failure	2	100	6 - 91	4	50	10 - 89
Severe Acute Heart Disease	60	40	27 - 54	65	43	29 - 54
Severe Chronic Heart Disease	55	29	12 - 37	58	22	14 - 37
Severe Trauma	3	0	3 - 80	1	0	0 - 99
Gastrointestinal Disease	83	2	1 - 11	87	5	0 - 16
Gynecologic Disease	12	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	124	7	1 - 13	137	2	2 - 8
Musculoskeletal/Skin Conditions	105	2	0 - 10	111	1	1 - 7
Neuropsychiatric/Sensory Disease	26	4	0 - 55	31	0	0 - 26
Urologic Disease	36	3	0 - 38	32	3	0 - 37

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	140
Occupancy Rate (%):	51
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	74
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	0
Registered Nurses:	118
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BELMONT COMMUNITY HOSPITAL

4058 W MELROSE STREET
CHICAGO, IL 60641

Medicare Hospital Provider Number: 140098

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	547	13	9 - 15	524	14	9 - 16
Cancer	12	92	30 - 70	19	63	22 - 65
Cerebrovascular Accidents	25	24	12 - 46	16	19	11 - 51
Gastrointestinal Catastrophes	6	33	8 - 75	3	0	5 - 79
Infectious Disease	3	0	9 - 82	9	56	16 - 75
Metabolic/Electrolyte Disorders	9	33	7 - 66	16	25	9 - 54
Pulmonary Disease	25	24	11 - 46	26	27	14 - 50
Renal Failure	3	67	9 - 92	1	0	1 - 97
Severe Acute Heart Disease	18	39	19 - 63	17	65	22 - 65
Severe Chronic Heart Disease	41	22	12 - 38	46	26	15 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	59	5	1 - 18	60	2	1 - 13
Gynecologic Disease	8	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	76	3	0 - 13	72	0	1 - 8
Musculoskeletal/Skin Conditions	57	0	1 - 10	43	2	0 - 30
Neuropsychiatric/Sensory Disease	4	0	0 - 99	9	0	0 - 98
Urologic Disease	22	5	0 - 99	17	6	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	134
Occupancy Rate (%):	35
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Belmont Community Hospital

4058 WEST MELROSE STREET, CHICAGO, ILLINOIS 60641
(312) 736-7000

October 21, 1988

Sandra Kappert
Health Care Financing
Administration
Health Standards and Quality
Bureau
Meadows East Building 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

In reference to the enclosed Medicare Hospital Mortality Information Report for calendar year 1987, please be advised of the following:

1) In the diagnostic category of "Cancer" in which a mortality factor of 92% for twelve (12) patients is reported, Belmont Community Hospital does not currently offer cancer therapy programs other than surgery. This is reflected in the small volume of Medicare patients admitted with a principal diagnosis of cancer.

   After review of the cases, it was found that these patients were either at the end-stage of the disease or terminal, and at the request of patient or family had "Do Not Resuscitate" orders written by their physician. The patients had either received cancer treatments prior to their last admission and subsequent death, or had sought initial treatment after the disease had become far advanced.

2) Please note that the Hospital should be listed under Specialty Services as having a Coronary Care Unit. It is currently listed that the Hospital does not.

If I can be of any further assistance, please feel free to contact me.

Sincerely,

Gary Callahan
Gary L. Callahan
Managing Director

GLC:jmk

Enclosure

BETHANY HOSPITAL

3435 W VAN BUREN
CHICAGO, IL 60624

Medicare Hospital Provider Number: 140152

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	271	9	8 - 16	365	8	8 - 14
Cancer	9	44	14 - 72	5	60	9 - 80
Cerebrovascular Accidents	10	30	7 - 62	10	0	9 - 44
Gastrointestinal Catastrophes	2	50	3 - 92	5	20	6 - 75
Infectious Disease	5	20	10 - 77	8	50	13 - 74
Metabolic/Electrolyte Disorders	9	22	2 - 64	15	20	9 - 53
Pulmonary Disease	12	33	11 - 62	20	25	7 - 47
Renal Failure	2	0	1 - 90	3	0	2 - 83
Severe Acute Heart Disease	8	25	13 - 70	8	0	17 - 58
Severe Chronic Heart Disease	18	17	9 - 46	24	17	11 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	16	0	0 - 75	22	0	0 - 71
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	36	3	0 - 37	43	0	0 - 14
Musculoskeletal/Skin Conditions	16	6	0 -100	30	0	0 - 71
Neuropsychiatric/Sensory Disease	8	0	0 -100	9	0	0 -100
Urologic Disease	21	0	0 - 95	18	6	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	156
Occupancy Rate (%):	67
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	48
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	150
Licensed Practical Nurses:	16

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Evangelical Health Systems

Bethany Hospital
3435 West Van Buren, Chicago, Illinois 60624, (312) 265-7700

ANALYSIS OF 1987 HCFA MORTALITY DATA

BETHANY HOSPITAL acknowledges receipt of HCFA's 1987 mortality data. We have thoroughly reviewed both 1987 and 1986 data, which HCFA recomputed using the 1987 updated model. The mortality rates for the 16 diagnostic categories in the 1986 data did not change with the recomputation and were therefore not reevaluated. All of Bethany Hospital's 1987 mortality rates by diagnostic category were within or well below the predicted mortality ranges.

Bethany Hospital also verified the hospital characteristics data against our response to the 1987 American Hospital Association Annual Survey. The hospital characteristics which were released with the HCFA mortality data are not consistent with the response reported to the AHA. The discrepancies included the following:

- Bethany Hospital does have a mixed Intensive Care Unit / Coronary Care Unit. The "Beds and Utilization by Inpatient Service" Section of the AHA Survey requests bed size for a mixed ICU/CCU under item 7 and bed size for a separate CCU under item 8. It appears that only beds appearing in item 8 were included in the HCFA response.

- The number of beds at Bethany Hospital is 212 rather than the 112 reported in the HCFA data.

We are pleased to have the opportunity to review data generated by external review agencies. Although mortality data represents a rather limited indicator of clinical competence, we will continue to review this and other reports, as well as internally generated clinical profiles, to ensure ongoing quality care at Bethany Hospital.

BETHANY HOSPITAL acknowledges the value of using mortality statistics as a mechanism with which to screen clinical data and identify areas which warrant a more in-depth focussed review. However, as stated by the JCAHO and AHA, Bethany Hospital also is aware that statistical indicators are not direct measures of quality. Any determination about actual quality of patient care can only be made as part of a case-oriented medical peer review process.

BLESSING HOSP

1005 BROADWAY
QUINCY, IL 62301

Medicare Hospital Provider Number: 140015

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,278	11	10 - 14	2,280	9	9 - 13
Cancer	78	32	28 - 53	70	41	29 - 56
Cerebrovascular Accidents	79	28	17 - 38	83	24	18 - 39
Gastrointestinal Catastrophes	18	33	12 - 57	10	30	10 - 65
Infectious Disease	24	33	20 - 59	14	21	18 - 63
Metabolic/Electrolyte Disorders	30	10	15 - 44	22	23	10 - 49
Pulmonary Disease	131	29	20 - 38	131	23	19 - 37
Renal Failure	19	37	19 - 73	18	17	14 - 66
Severe Acute Heart Disease	79	43	26 - 49	64	39	29 - 54
Severe Chronic Heart Disease	73	27	19 - 40	78	18	15 - 34
Severe Trauma	10	40	6 - 65	6	17	6 - 70
Gastrointestinal Disease	216	3	2 - 8	200	3	1 - 8
Gynecologic Disease	12	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	263	4	2 - 7	259	3	1 - 7
Musculoskeletal/Skin Conditions	232	2	1 - 6	265	2	1 - 6
Neuropsychiatric/Sensory Disease	124	2	0 - 9	160	2	0 - 9
Urologic Disease	119	2	0 - 9	106	3	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	256
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	98
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	Yes

BLESSING HOSPITAL
Broadway at 11th Street Quincy, Illinois 62301 (217) 223-5811

October 24, 1988

Health Care Financing Administration
Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2 - D - 2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Re: Commments on Mortality Data

To Whom It May Concern:

The mortality data reported by HCFA for patients at Blessing Hospital during 1987 accurately reflects experiences recorded by the Hospital during that period. Several of the reported Hospital characteristics, however, are in error. These are as follows:

1. Blessing Hospital operated 241 beds during the period, not 176 as reported by HCFA.

2. Of the physicians on its staff, 80 percent are board certified specialists, not 63 percent as reported by HCFA.

3. Blessing Hospital does not have a Shock/Trauma or Burn Unit as affirmatively reported by HCFA.

4. Blessing Hospital does not operate an Organ Transplant Service as affirmatively reported by HCFA.

Respectfully,

Richard J. Smith
Administrative Director -
Community Relations

RJS:rk

BROKAW HOSPITAL
VIRGINIA AT FRANKLIN
NORMAL, IL 61761

Medicare Hospital Provider Number: 140127

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,334	8	8 - 12	1,318	10	8 - 13
Cancer	30	30	24 - 59	39	26	25 - 56
Cerebrovascular Accidents	45	33	15 - 43	41	29	16 - 45
Gastrointestinal Catastrophes	5	0	9 - 67	9	33	9 - 67
Infectious Disease	12	17	18 - 64	11	36	11 - 65
Metabolic/Electrolyte Disorders	10	50	9 - 67	8	13	4 - 60
Pulmonary Disease	53	19	16 - 39	62	24	17 - 41
Renal Failure	4	0	9 - 77	4	50	11 - 90
Severe Acute Heart Disease	35	31	24 - 56	36	28	28 - 58
Severe Chronic Heart Disease	81	30	15 - 36	68	19	14 - 35
Severe Trauma	1	0	0 - 99	2	0	1 - 91
Gastrointestinal Disease	114	6	1 - 14	133	5	1 - 10
Gynecologic Disease	15	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	121	2	1 - 8	111	1	1 - 7
Musculoskeletal/Skin Conditions	180	1	1 - 6	156	3	1 - 9
Neuropsychiatric/Sensory Disease	161	1	0 - 8	156	1	1 - 7
Urologic Disease	41	5	0 - 54	32	3	0 - 40

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	317
Ownership/Control:	Church

STAFFING

Interns and Residents:	0
Registered Nurses:	247
Licensed Practical Nurses:	76

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	Yes

BURNHAM HOSPITAL

407 S 4TH ST
CHAMPAIGN, IL 61820

Medicare Hospital Provider Number: 140126

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,321	11	9 - 14	1,219	11	9 - 14
Cancer	37	30	27 - 59	35	34	30 - 64
Cerebrovascular Accidents	53	25	18 - 43	47	36	15 - 44
Gastrointestinal Catastrophes	14	36	12 - 62	6	0	13 - 64
Infectious Disease	7	14	18 - 74	6	0	14 - 65
Metabolic/Electrolyte Disorders	19	32	12 - 56	19	32	13 - 56
Pulmonary Disease	69	26	17 - 40	47	26	17 - 44
Renal Failure	11	45	15 - 77	6	83	12 - 79
Severe Acute Heart Disease	40	38	19 - 50	41	41	25 - 56
Severe Chronic Heart Disease	77	18	14 - 33	73	18	14 - 33
Severe Trauma	7	43	7 - 73	8	25	6 - 67
Gastrointestinal Disease	89	2	1 - 11	86	1	1 - 9
Gynecologic Disease	12	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	209	3	2 - 7	205	2	2 - 7
Musculoskeletal/Skin Conditions	141	3	1 - 9	124	3	0 - 11
Neuropsychiatric/Sensory Disease	30	3	0 - 45	37	0	0 - 18
Urologic Disease	47	0	0 - 24	26	0	0 - 39

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	170
Occupancy Rate (%):	50
Ownership/Control:	, Local Government

STAFFING

Total Number of Physicians:	121
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	0
Registered Nurses:	126
Licensed Practical Nurses:	36

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CARLE FOUNDATION HOSPITAL

611 WEST PARK STREET
URBANA , IL 61801

Medicare Hospital Provider Number: 140091

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,296	9	9 - 13	2,193	10	9 - 14
Cancer	117	33	29 - 51	111	39	31 - 54
Cerebrovascular Accidents	65	22	16 - 37	66	18	17 - 37
Gastrointestinal Catastrophes	23	39	18 - 60	18	50	15 - 61
Infectious Disease	30	33	21 - 57	24	25	18 - 56
Metabolic/Electrolyte Disorders	29	24	18 - 53	20	30	12 - 54
Pulmonary Disease	83	16	17 - 36	82	29	19 - 41
Renal Failure	9	22	14 - 75	7	71	8 - 76
Severe Acute Heart Disease	48	44	22 - 51	79	33	28 - 50
Severe Chronic Heart Disease	65	20	14 - 35	75	25	15 - 37
Severe Trauma	6	17	5 - 70	3	0	4 - 79
Gastrointestinal Disease	165	2	1 - 7	162	2	1 - 7
Gynecologic Disease	29	0	0 -100	27	4	0 -100
Low-Risk Heart Disease	276	2	2 - 6	230	1	2 - 5
Musculoskeletal/Skin Conditions	292	2	1 - 5	261	1	1 - 5
Neuropsychiatric/Sensory Disease	150	0	1 - 6	147	3	1 - 10
Urologic Disease	105	4	0 - 27	80	0	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	493
Occupancy Rate (%):	66
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Carle

Carle Foundation Hospital
611 West Park Street, Urbana, IL 61801 Phone: (217) 337-3311

#14-0091

October 21, 1988

Mr. William L. Roper, MD
Administrator
Department of Health and Human Services
Washington, D.C. 20201

Dear Dr. Roper:

Thank you for the opportunity to comment on the release of HCFA's mortality data. As a health care provider interested in evaluating and improving quality of care, Carle Foundation Hospital is particularly interested in the report. While it is by no means a stand-alone document for evaluating quality, and addresses only Medicare patients, it does provide Carle with another source of information to include in our quality review efforts.

Overall, Medicare mortality rates for Carle Foundation Hospital decreased 1 percent from 1986 to 1987, and fall on the low end (9 percent) of the predicted range (9-13 percent).

We are pleased to note that Carle Foundation Hospital's overall mortality rate falls below the predicted mean. In evaluating this year's report and comparing it to last year's document, we have made three basic observations: 1) 1986 figures have been adjusted to reflect changes in HCFA's definitions of diagnostic categories; 2) reports for both years reflect the last discharge for patients included in the study, and not the total number of cases/admissions for the year; and, 3) the diagnostic categories listed do not necessarily reflect the actual causes of death for the Medicare patients included in this study.

Our first observation (changes in HCFA's definition of certain diagnostic categories) is the most important in commenting on specific findings about Carle's Medicare mortality rates. These changes are most significant for Carle in two areas: cardiac and trauma. We would like to address both of these areas.

It would appear that changes in mortality rates for the categories "Severe Acute Heart Disease" and "Low Risk Heart Disease" are primarily attributable to changes in category definitions. By removing paroxysmal ventricular tachycardia and aortic aneurysm, not ruptured, from the "Severe Acute Heart Disease" definition, this category represents more serious cases in the 1987 report than in the previous year's report. The addition of six new diagnoses to this category has the same effect. Similarly, increased numbers in the "Low Risk Heart Disease" category are reflective of this diagnostic group shifting from high- to low-risk categories.

A similar shift in diagnoses from one category to another is evident in the "Severe Trauma" category. Eleven diagnostic groups were removed from Trauma, several of which represent very common injuries in the elderly Medicare population under study (specifically, fractures of the hip, pelvis and femur). These diagnoses have been shifted to a new category, "Muskuloskeletal-Cutaneous Conditions," and are responsible for an increase in numbers in that category (formerly "Orthopedic Disorders"). Furthermore, two more serious conditions have been added to Trauma: cervical fractures with spinal cord injury and flail chest injury.

Although we have chosen to elaborate on the two aforementioned categories, we also wish to note that HCFA's changes in category definitions are responsible for mortality rate changes throughout the report. In some cases, these rates are based on as few as one patient in a given category.

While changes in diagnostic category definitions have required us to perform numerous cross-checking activities, we are pleased to see HCFA refining this mortality report each year. We believe that the growing effort on the part of government, consumers, physicians and hospitals to define and measure quality is important and should continue. Carle's quality assessment activities are not limited to feedback received from external sources; however, the HCFA report is helpful because it provides us with information about patients after discharge and allows us to incorporate this post-discharge data into our quality assessment database.

Again, thank you for the mortality information and for the opportunity to share our comments with you.

Sincerely,

CARLE FOUNDATION HOSPITAL

Stephen R. Humpherys MD

Stephen R. Humpherys, MD
Hospital Medical Director

SRH:cjs

CARLE PAVILION, INC.

809 W CHURCH ST
CHAMPAIGN, IL 61820

Medicare Hospital Provider Number: 140243

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	217	13	8 - 17	323	14	8 - 17
Cancer	3	100	21 - 95	11	82	22 - 69
Cerebrovascular Accidents	8	38	6 - 68	8	25	8 - 66
Gastrointestinal Catastrophes	1	0	2 - 97	3	33	7 - 88
Infectious Disease	0	-	-	2	50	5 - 93
Metabolic/Electrolyte Disorders	4	0	9 - 73	5	40	7 - 79
Pulmonary Disease	22	23	13 - 50	16	13	9 - 47
Renal Failure	0	-	-	2	50	0 - 97
Severe Acute Heart Disease	4	100	13 - 76	8	50	11 - 72
Severe Chronic Heart Disease	12	17	8 - 54	27	37	9 - 46
Severe Trauma	1	0	0 - 98	3	33	5 - 87
Gastrointestinal Disease	26	8	0 - 38	43	2	0 - 20
Gynecologic Disease	9	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	22	9	0 - 61	35	9	0 - 33
Musculoskeletal/Skin Conditions	21	10	0 - 98	41	0	0 - 17
Neuropsychiatric/Sensory Disease	2	0	0 - 99	7	0	0 -100
Urologic Disease	13	0	0 -100	13	0	0 - 88

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	65
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

CARLINVILLE AREA HOSPITAL

1001 E MORGAN ST
CARLINVILLE, IL 62626

Medicare Hospital Provider Number: 140141

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	397	13	8 - 15	449	12	8 - 15
Cancer	5	40	9 - 80	3	33	7 - 88
Cerebrovascular Accidents	15	47	9 - 58	22	27	12 - 50
Gastrointestinal Catastrophes	5	40	7 - 79	3	67	9 - 90
Infectious Disease	3	33	2 - 86	3	33	6 - 87
Metabolic/Electrolyte Disorders	3	33	5 - 87	5	80	3 - 75
Pulmonary Disease	36	14	16 - 42	46	13	14 - 37
Renal Failure	1	0	0 -100	0	-	-
Severe Acute Heart Disease	2	100	5 - 89	8	38	13 - 73
Severe Chronic Heart Disease	20	50	9 - 52	17	35	9 - 54
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	31	3	0 - 35	37	3	0 - 31
Gynecologic Disease	7	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	55	4	0 - 20	53	2	1 - 14
Musculoskeletal/Skin Conditions	44	0	0 - 13	47	4	0 - 24
Neuropsychiatric/Sensory Disease	18	0	0 - 95	11	9	0 -100
Urologic Disease	13	23	0 - 90	18	6	0 - 97

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	54
Occupancy Rate (%):	41
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	11
Percent of Physicians Who Are Board Certified Specialists:	18
Interns and Residents:	0
Registered Nurses:	19
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CARMI TOWNSHIP HOSPITAL

PLUM AND WEBB STREETS
CARMI, IL 62821

Medicare Hospital Provider Number: 140107

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	506	14	10 - 17	553	12	10 - 17
Cancer	11	73	28 - 79	6	33	20 - 86
Cerebrovascular Accidents	13	38	8 - 59	24	21	13 - 47
Gastrointestinal Catastrophes	2	50	5 - 93	2	50	3 - 92
Infectious Disease	7	0	14 - 60	6	33	13 - 79
Metabolic/Electrolyte Disorders	8	0	6 - 50	10	20	7 - 60
Pulmonary Disease	43	28	14 - 43	40	13	16 - 40
Renal Failure	2	50	7 - 98	5	40	13 - 87
Severe Acute Heart Disease	32	44	24 - 59	27	63	27 - 63
Severe Chronic Heart Disease	36	28	10 - 40	38	13	15 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	40	2	0 - 21	71	7	1 - 18
Gynecologic Disease	3	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	103	0	2 - 6	94	2	1 - 10
Musculoskeletal/Skin Conditions	45	2	0 - 20	38	3	0 - 29
Neuropsychiatric/Sensory Disease	11	9	0 - 63	14	7	0 - 96
Urologic Disease	7	0	0 -100	22	5	0 - 46

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	47
Occupancy Rate (%):	61
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	6
Percent of Physicians Who Are Board Certified Specialists:	33
Interns and Residents:	0
Registered Nurses:	24
Licensed Practical Nurses:	15

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CENTRAL COMMUNITY HOSPITAL

5701 SOUTH WOOD STREET
CHICAGO, IL 60636

Medicare Hospital Provider Number: 140085

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	389	10	9 - 16	415	12	10 - 17
Cancer	12	33	18 - 69	12	50	15 - 68
Cerebrovascular Accidents	6	17	9 - 70	11	18	5 - 55
Gastrointestinal Catastrophes	4	25	4 - 80	6	50	7 - 76
Infectious Disease	1	0	1 - 97	3	0	7 - 80
Metabolic/Electrolyte Disorders	28	14	14 - 46	15	20	4 - 51
Pulmonary Disease	28	21	15 - 48	15	27	16 - 61
Renal Failure	2	100	5 - 90	4	75	12 - 89
Severe Acute Heart Disease	11	36	16 - 68	26	54	24 - 61
Severe Chronic Heart Disease	22	18	9 - 43	49	14	13 - 34
Severe Trauma	0	-	-	1	0	2 - 97
Gastrointestinal Disease	26	0	0 - 46	28	4	0 - 65
Gynecologic Disease	3	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	48	2	1 - 15	48	6	0 - 31
Musculoskeletal/Skin Conditions	46	0	1 - 12	55	0	0 - 15
Neuropsychiatric/Sensory Disease	9	33	0 -100	6	0	0 -100
Urologic Disease	26	4	0 - 80	12	0	0 - 87

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	104
Occupancy Rate (%):	51
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	67
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	55
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CENTRAL COMMUNITY HOSPITAL

335 E 5TH AVENUE
CLIFTON, IL 60927

Medicare Hospital Provider Number: 140236

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	130	12	7 - 19	141	11	8 - 19
Cancer	1	100	3 - 99	2	0	3 - 88
Cerebrovascular Accidents	4	25	2 - 80	10	30	11 - 64
Gastrointestinal Catastrophes	3	0	6 - 80	0	-	-
Infectious Disease	0	-	-	1	0	1 - 97
Metabolic/Electrolyte Disorders	7	0	3 - 54	9	0	5 - 47
Pulmonary Disease	9	0	7 - 46	10	30	4 - 62
Renal Failure	2	100	9 - 94	0	-	-
Severe Acute Heart Disease	5	40	9 - 80	4	50	9 - 85
Severe Chronic Heart Disease	10	40	3 - 63	10	20	8 - 59
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	8	0	0 -100	15	7	0 - 80
Gynecologic Disease	1	0	0 -100	0	-	-
Low-Risk Heart Disease	25	16	0 - 84	28	0	0 - 22
Musculoskeletal/Skin Conditions	12	0	0 - 83	8	13	0 - 91
Neuropsychiatric/Sensory Disease	5	0	0 -100	5	0	0 -100
Urologic Disease	8	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	31
Occupancy Rate (%):	26
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	12
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	1
Registered Nurses:	8
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CENTRAL DUPAGE HOSP

0 N 025 WINFIELD ROAD
WINFIELD, IL 60190

Medicare Hospital Provider Number: 140242

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,021	11	9 - 14	2,283	11	9 - 14
Cancer	62	42	28 - 55	71	49	27 - 53
Cerebrovascular Accidents	102	23	18 - 36	92	36	18 - 39
Gastrointestinal Catastrophes	18	28	18 - 62	29	31	19 - 57
Infectious Disease	29	34	20 - 56	38	16	23 - 52
Metabolic/Electrolyte Disorders	41	29	17 - 49	36	39	12 - 48
Pulmonary Disease	101	27	15 - 35	114	21	15 - 34
Renal Failure	9	33	11 - 75	8	25	7 - 73
Severe Acute Heart Disease	55	42	26 - 53	71	39	27 - 51
Severe Chronic Heart Disease	113	20	16 - 33	125	26	16 - 33
Severe Trauma	0	-	-	3	0	7 - 81
Gastrointestinal Disease	191	3	1 - 8	174	3	1 - 8
Gynecologic Disease	23	0	0 -100	21	0	0 -100
Low-Risk Heart Disease	213	5	1 - 9	208	4	2 - 8
Musculoskeletal/Skin Conditions	243	2	1 - 6	243	1	1 - 5
Neuropsychiatric/Sensory Disease	137	0	0 - 6	180	1	0 - 7
Urologic Disease	73	4	0 - 39	119	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	334
Occupancy Rate (%):	74
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	317
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	447
Licensed Practical Nurses:	1

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

CENTREVILLE TOWNSHIP HOSPITAL

5900 BOND AVENUE
CENTREVILLE, IL 62207

Medicare Hospital Provider Number: 140077

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	221	12	6 - 16	190	13	7 - 17
Cancer	2	100	11 - 95	3	100	18 - 91
Cerebrovascular Accidents	7	43	4 - 71	6	50	10 - 77
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	5	20	9 - 76	3	33	5 - 86
Metabolic/Electrolyte Disorders	12	8	6 - 49	4	25	1 - 83
Pulmonary Disease	8	13	5 - 59	13	0	7 - 37
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	7	71	12 - 73	7	57	11 - 74
Severe Chronic Heart Disease	23	26	7 - 45	20	20	9 - 46
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	14	0	0 - 61	14	0	0 - 98
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	34	0	0 - 22	34	0	0 - 21
Musculoskeletal/Skin Conditions	15	0	0 - 89	18	0	0 - 52
Neuropsychiatric/Sensory Disease	9	11	0 - 98	4	0	0 -100
Urologic Disease	13	0	0 - 99	13	0	0 - 97

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	167
Occupancy Rate (%):	27
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	63
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	71
Licensed Practical Nurses:	21

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CHICAGO OSTEOPATHIC MEDICAL CTR

5200 S ELLIS AVENUE
CHICAGO, IL 60615

Medicare Hospital Provider Number: 140172

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,053	14	10 - 15	1,850	14	10 - 15
Cancer	53	45	27 - 56	49	39	27 - 57
Cerebrovascular Accidents	76	25	17 - 38	63	32	18 - 42
Gastrointestinal Catastrophes	19	37	13 - 58	18	28	15 - 58
Infectious Disease	60	47	25 - 54	51	39	22 - 53
Metabolic/Electrolyte Disorders	64	25	13 - 41	41	37	11 - 45
Pulmonary Disease	108	40	19 - 40	109	37	19 - 40
Renal Failure	22	36	15 - 68	10	20	15 - 75
Severe Acute Heart Disease	50	50	24 - 53	44	52	27 - 57
Severe Chronic Heart Disease	97	19	15 - 32	87	18	14 - 32
Severe Trauma	8	13	12 - 65	3	0	1 - 82
Gastrointestinal Disease	114	5	1 - 13	111	6	1 - 13
Gynecologic Disease	19	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	295	4	2 - 7	254	4	2 - 8
Musculoskeletal/Skin Conditions	148	1	1 - 6	179	2	1 - 7
Neuropsychiatric/Sensory Disease	69	0	0 - 9	64	2	0 - 23
Urologic Disease	91	3	0 - 16	61	8	0 - 32

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	212
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	218
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	166
Licensed Practical Nurses:	27

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

October 25, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health & Human Services
Washington, DC 20201

Dear Doctor Roper:

A review of the 1987 HCFA data regarding Chicago Osteopathic Medical Centers has been conducted. The mortality data reported in your studies show that our hospitals falls within acceptable percentages.

In addition, we have compared your data with our own internal case mix data. The patients included in your study have concomitant diagnoses and multiple complications. Most of them belong to the older elderly population group and represent a sticker patient population. Our institutions have experienced a rapid growth in case mix acuity index. It has risen 11% in two (2) years and is the third highest of the major teaching hospitals in Illinois.

We are pleased that we have been able to provide exemplary services to the Medicare population and look forward to working with you to assure the highest quality of patient care in the future.

Sincerely,

Lawrence U. Haspel DO

Lawrence U. Haspel, D.O., FACOI
Executive Vice President
Chicago Osteopathic Medical Centers

LUH/smr
5351f

cc: Jack B. Kinsinger, Ph.D.
President

CHRIST HOSPITAL

4440 W 95TH STREET
OAK LAWN, IL 60453

Medicare Hospital Provider Number: 140208

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	5,015	14	12 - 16	5,044	14	12 - 16
Cancer	197	48	32 - 51	214	50	31 - 51
Cerebrovascular Accidents	218	27	19 - 33	212	25	19 - 33
Gastrointestinal Catastrophes	54	37	21 - 52	42	33	22 - 55
Infectious Disease	119	38	26 - 49	115	41	26 - 51
Metabolic/Electrolyte Disorders	75	27	18 - 45	93	22	13 - 38
Pulmonary Disease	326	31	21 - 36	334	29	22 - 37
Renal Failure	24	42	17 - 69	21	38	14 - 69
Severe Acute Heart Disease	274	37	30 - 46	250	40	33 - 49
Severe Chronic Heart Disease	309	23	17 - 28	267	21	16 - 28
Severe Trauma	15	27	10 - 58	9	22	7 - 64
Gastrointestinal Disease	345	3	2 - 7	334	2	2 - 6
Gynecologic Disease	33	0	0 -100	32	0	0 -100
Low-Risk Heart Disease	645	3	2 - 5	654	2	2 - 5
Musculoskeletal/Skin Conditions	444	4	1 - 6	473	3	1 - 6
Neuropsychiatric/Sensory Disease	137	2	1 - 9	132	2	1 - 9
Urologic Disease	152	2	0 - 9	147	3	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	824
Occupancy Rate (%):	70
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	375
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	61
Registered Nurses:	859
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Evangelical Health Systems

Christ Hospital & Medical Center
4440 West 95th Street, Oak Lawn, Illinois 60453 (312) 425-8000

ANALYSIS OF 1987 HCFA MORTALITY DATA

CHRIST HOSPITAL AND MEDICAL CENTER acknowledges receipt of HCFA's 1987 mortality data. We have thoroughly reviewed both 1987 and 1986 data, which HCFA recomputed using the 1987 updated model. The mortality rates for the 16 diagnostic categories in the 1986 data did not change with the recomputation and were therefore not reevaluated. Christ Hospital and Medical Center's 1987 actual mortality rates did not fall outside the predicted ranges for any of the 16 diagnostic-specific categories or the overall mortality category.

Christ Hospital and Medical Center also verified the hospital characteristics data against our response to the 1987 American Hospital Association Annual Survey. The hospital characteristics which were released with the HCFA mortality data are not consistent with the response reported to the AHA. Christ Hospital and Medical Center's bed size is 824 rather than the 599 reported in the HCFA data.

Christ Hospital and Medical Center feels that mortality data can be appropriately used to guide or focus medical peer review. The decision was made to analyze categories where it appeared that the actual rate ranked higher than average in the predicted ranges.

After medical peer review, it was confirmed that the HCFA methodology was not able to account for several patient characteristics which contributed to the actual cause of death among patients in the diagnostic category of cancer. Christ Hospital and Medical Center is a large community teaching institution which receives a significant number of cancer patients who are referred for specialized oncology services. Many of these patients are terminally ill and palliative treatment is the indicated service. In analyzing the mortality data, it was determined that almost the entire population of patients who died at Christ Hospital and Medical Center were terminal patients with multi-system metastatic disease.

CHRIST HOSPITAL AND MEDICAL CENTER recognizes the value of using mortality statistics as a mechanism with which to screen clinical data and identify areas which warrant a more in-depth focussed review. However, as stated by the JCAHO and AHA, Christ Hospital and Medical Center also is aware that statistical indicators are not direct measures of quality. As demonstrated by the above analysis, any determination about actual quality of patient care can only be made as part of a case-oriented medical peer review process.

CLAY COUNTY HOSP

700 N MILL ST
FLORA, IL 62839

Medicare Hospital Provider Number: 140016

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	246	17	12 - 22	254	20	12 - 23
Cancer	4	75	20 - 95	7	86	16 - 72
Cerebrovascular Accidents	11	45	11 - 65	10	20	12 - 62
Gastrointestinal Catastrophes	4	50	8 - 84	0	-	-
Infectious Disease	3	33	4 - 86	7	29	15 - 76
Metabolic/Electrolyte Disorders	15	27	13 - 60	16	38	8 - 56
Pulmonary Disease	29	31	12 - 47	24	17	12 - 44
Renal Failure	3	0	9 - 85	2	0	6 - 91
Severe Acute Heart Disease	10	70	15 - 68	27	56	23 - 60
Severe Chronic Heart Disease	29	17	10 - 39	17	24	11 - 52
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	19	0	0 - 86	19	0	0 - 37
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	33	0	0 - 20	30	10	0 - 55
Musculoskeletal/Skin Conditions	16	0	0 - 79	24	8	0 - 71
Neuropsychiatric/Sensory Disease	7	14	0 - 93	7	0	0 -100
Urologic Disease	2	50	0 -100	2	0	1 - 90

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	40
Occupancy Rate (%):	30
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	10
Percent of Physicians Who Are Board Certified Specialists:	90
Interns and Residents:	0
Registered Nurses:	25
Licensed Practical Nurses:	1

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COLUMBUS HOSPITAL

2520 N LAKEVIEW AVENUE
CHICAGO, IL 60614

Medicare Hospital Provider Number: 140090

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,795	12	10 - 15	1,848	13	11 - 16
Cancer	58	33	28 - 55	67	51	33 - 60
Cerebrovascular Accidents	55	20	15 - 38	67	21	20 - 41
Gastrointestinal Catastrophes	23	43	18 - 60	19	37	17 - 61
Infectious Disease	22	45	20 - 61	23	43	22 - 63
Metabolic/Electrolyte Disorders	49	22	14 - 43	40	32	14 - 48
Pulmonary Disease	110	36	22 - 42	96	42	20 - 43
Renal Failure	7	43	10 - 79	10	0	16 - 67
Severe Acute Heart Disease	48	27	26 - 52	40	42	28 - 59
Severe Chronic Heart Disease	86	17	14 - 32	85	16	14 - 32
Severe Trauma	1	100	0 - 97	8	13	6 - 62
Gastrointestinal Disease	112	1	2 - 8	112	4	1 - 11
Gynecologic Disease	17	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	195	6	1 - 9	210	2	2 - 7
Musculoskeletal/Skin Conditions	161	1	1 - 6	170	2	1 - 7
Neuropsychiatric/Sensory Disease	110	0	1 - 6	147	2	0 - 9
Urologic Disease	64	0	0 - 11	65	3	0 - 32

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	311
Occupancy Rate (%):	62
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	62
Registered Nurses:	358
Licensed Practical Nurses:	84

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COLUMBUS HOSPITAL
COLUMBUS • CUNEO • CABRINI MEDICAL CENTER

2520 North Lakeview Avenue • Chicago, Illinois 60614 • 312/883-7300

October 6, 1988

William L. Roper, M.D., Administrator
Dept. of Health & Human Services
Hospital Mortality Information
P.O. Box 26684
Baltimore, Maryland 21207

Dear Doctor Roper:

The Governing Board and Medical Staff of Columbus Hospital are committed to providing the highest level of quality care to all our patients and would like to make the following statement in regards to the release of HCFA Mortality Data. Quality care can only be effectively evaluated through the process of peer review which includes as part of this process all our hospital deaths.

After careful review of the data provided us we note that the statistics reflect that 65% of our deaths are at the low-range percentage of predictability with 29% at the mid-range. In the Severe Trauma category, there was one case, which was above the expected norm of 0 - 97%. With only one case in the category, it is difficult to address the issue with any statistical analysis. Review of the case indicates appropriate management of the patient.

We still feel, however, that the over-all data is insufficient to draw any conclusions regarding the quality of care at our institution. Columbus Hospital is proud of its longstanding reputation for providing outstanding quality patient care.

Sincerely yours,

James F. Chambliss, M.D.
Executive Medical Director

COMMUNITY GEN HOSP

1601 FIRST AVENUE
STERLING, IL 61081

Medicare Hospital Provider Number: 140043

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,270	12	9 - 14	1,322	12	10 - 15
Cancer	35	63	27 - 61	37	57	32 - 65
Cerebrovascular Accidents	36	25	16 - 45	37	22	18 - 45
Gastrointestinal Catastrophes	8	13	11 - 64	15	53	17 - 67
Infectious Disease	16	31	18 - 63	12	25	16 - 65
Metabolic/Electrolyte Disorders	16	6	9 - 44	25	16	10 - 45
Pulmonary Disease	48	33	12 - 41	59	20	12 - 36
Renal Failure	9	56	19 - 83	6	33	12 - 83
Severe Acute Heart Disease	51	49	23 - 52	50	44	26 - 54
Severe Chronic Heart Disease	87	28	13 - 33	104	34	15 - 35
Severe Trauma	2	50	1 - 93	3	33	8 - 89
Gastrointestinal Disease	124	6	1 - 13	124	5	1 - 11
Gynecologic Disease	13	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	184	5	1 - 9	157	4	1 - 9
Musculoskeletal/Skin Conditions	131	2	0 - 8	124	1	1 - 7
Neuropsychiatric/Sensory Disease	36	0	0 - 31	48	0	0 - 13
Urologic Disease	54	2	0 - 30	68	3	0 - 22

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	127
Occupancy Rate (%):	59
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	55
Percent of Physicians Who Are Board Certified Specialists:	53
Interns and Residents:	0
Registered Nurses:	117
Licensed Practical Nurses:	24

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COMMUNITY HOSPITAL OF OTTAWA

1100 EAST NORRIS DRIVE
OTTAWA, IL 61350

Medicare Hospital Provider Number: 140110

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	879	14	11 - 17	872	15	11 - 17
Cancer	32	59	23 - 59	31	61	29 - 64
Cerebrovascular Accidents	53	34	16 - 42	41	37	15 - 45
Gastrointestinal Catastrophes	11	36	12 - 66	7	71	8 - 71
Infectious Disease	11	27	12 - 64	9	33	14 - 71
Metabolic/Electrolyte Disorders	23	13	10 - 44	19	26	7 - 51
Pulmonary Disease	52	33	16 - 43	67	22	13 - 36
Renal Failure	4	50	5 - 84	4	100	18 - 86
Severe Acute Heart Disease	45	29	25 - 53	41	39	26 - 56
Severe Chronic Heart Disease	50	18	14 - 37	45	22	12 - 37
Severe Trauma	0	-	-	4	100	7 - 73
Gastrointestinal Disease	67	0	1 - 8	84	4	1 - 12
Gynecologic Disease	4	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	73	1	2 - 10	62	6	1 - 19
Musculoskeletal/Skin Conditions	81	5	0 - 17	95	4	0 - 17
Neuropsychiatric/Sensory Disease	25	4	0 - 87	27	7	1 - 36
Urologic Disease	42	0	0 - 24	43	5	1 - 23

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	155
Occupancy Rate (%):	42
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	44
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	0
Registered Nurses:	122
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COMMUNITY MEMORIAL HOSPITAL

1000 W HARLEM AVE
MONMOUTH, IL 61462

Medicare Hospital Provider Number: 140047

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	545	14	10 - 16	570	13	10 - 16
Cancer	7	57	12 - 76	10	60	17 - 72
Cerebrovascular Accidents	25	44	12 - 50	27	19	15 - 46
Gastrointestinal Catastrophes	4	25	11 - 84	3	0	6 - 80
Infectious Disease	1	100	0 - 98	10	10	18 - 64
Metabolic/Electrolyte Disorders	9	22	2 - 65	16	19	7 - 50
Pulmonary Disease	51	20	17 - 42	32	28	12 - 44
Renal Failure	2	50	7 - 96	3	67	10 - 93
Severe Acute Heart Disease	24	46	26 - 65	24	58	27 - 66
Severe Chronic Heart Disease	39	18	11 - 37	39	21	10 - 37
Severe Trauma	0	-	-	1	100	3 - 98
Gastrointestinal Disease	52	2	1 - 14	61	2	0 - 14
Gynecologic Disease	2	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	73	7	1 - 17	60	5	0 - 20
Musculoskeletal/Skin Conditions	54	2	0 - 21	65	5	0 - 25
Neuropsychiatric/Sensory Disease	14	0	0 - 93	11	0	0 -100
Urologic Disease	13	0	0 -100	6	17	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	92
Occupancy Rate (%):	40
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	16
Percent of Physicians Who Are Board Certified Specialists:	38
Interns and Residents:	0
Registered Nurses:	38
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

COMMUNITY
MEMORIAL
HOSPITAL

MONMOUTH, ILLINOIS 61462

September 29, 1988

Mrs. Sandra Kappert
Health Standards & Quality Bureau,HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

I am writing in response to Dr. Roper's letter of September 15, 1988, regarding the mortality information for Medicare patients treated in 1987.

On the final page of this report in the section titled "Hospital Characteristics" there are two errors. With regard to the number of physicians who are board certified specialists, your report indicates 19%. In 1987, however, 81% of our medical staff consisted of board certified specialists. Your report also indicates under specialty services, that we do not have a coronary care unit. Again, in 1987, as in the present, Community Memorial Hospital had a coronary care unit. Please correct your records.

Thank you for the opportunity to comment on your report.

Sincerely,

David M. Coates, Ph.D.

David M. Coates, Ph.D.
President/CEO

DMC/mw
Enclosure

COMMUNITY MEMORIAL HOSPITAL

216 W PENNSYLVANIA
STAUNTON, IL 62088

Medicare Hospital Provider Number: 140086

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	407	15	9 - 17	381	13	9 - 17
Cancer	11	55	22 - 76	14	71	29 - 75
Cerebrovascular Accidents	7	43	4 - 71	20	30	12 - 52
Gastrointestinal Catastrophes	3	33	1 - 88	1	100	1 - 97
Infectious Disease	4	50	7 - 83	1	0	1 - 97
Metabolic/Electrolyte Disorders	11	36	6 - 62	3	0	0 - 92
Pulmonary Disease	39	31	15 - 45	24	42	12 - 51
Renal Failure	0	-	-	1	0	2 - 97
Severe Acute Heart Disease	22	41	22 - 62	15	40	16 - 63
Severe Chronic Heart Disease	10	30	5 - 61	21	33	9 - 50
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	36	0	0 - 18	28	0	1 - 20
Gynecologic Disease	5	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	29	3	0 - 29	43	0	1 - 12
Musculoskeletal/Skin Conditions	50	2	1 - 16	38	3	0 - 38
Neuropsychiatric/Sensory Disease	11	0	0 -100	7	0	0 -100
Urologic Disease	16	6	0 - 90	20	0	0 - 41

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	59
Occupancy Rate (%):	34
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	23
Percent of Physicians Who Are Board Certified Specialists:	91
Interns and Residents:	0
Registered Nurses:	28
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CONDELL MEM HOSP

900 GARFIELD
LIBERTYVILLE, IL 60048

Medicare Hospital Provider Number: 140202

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,218	14	12 - 17	1,202	14	12 - 17
Cancer	40	38	27 - 59	42	55	31 - 63
Cerebrovascular Accidents	47	26	15 - 41	54	20	18 - 41
Gastrointestinal Catastrophes	16	31	14 - 60	20	40	15 - 59
Infectious Disease	26	42	20 - 59	26	27	20 - 57
Metabolic/Electrolyte Disorders	23	22	13 - 51	32	31	12 - 48
Pulmonary Disease	95	28	16 - 37	75	24	15 - 37
Renal Failure	7	57	17 - 86	6	50	12 - 83
Severe Acute Heart Disease	52	44	28 - 56	52	42	26 - 54
Severe Chronic Heart Disease	87	31	15 - 35	80	22	14 - 34
Severe Trauma	3	0	5 - 79	3	67	7 - 88
Gastrointestinal Disease	88	5	1 - 14	67	3	2 - 13
Gynecologic Disease	7	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	128	0	2 - 5	132	3	1 - 9
Musculoskeletal/Skin Conditions	124	2	1 - 9	126	2	2 - 9
Neuropsychiatric/Sensory Disease	34	9	0 - 37	32	0	0 - 23
Urologic Disease	45	2	0 - 32	51	0	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	181
Occupancy Rate (%):	59
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	98
Percent of Physicians Who Are Board Certified Specialists:	90
Interns and Residents:	0
Registered Nurses:	147
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COOK COUNTY HOSPITAL

1825 W HARRISON ST
CHICAGO , IL 60612

Medicare Hospital Provider Number: 140124

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,183	8	8 - 12	2,330	7	8 - 12
Cancer	90	30	31 - 54	85	28	33 - 56
Cerebrovascular Accidents	51	12	14 - 34	49	20	14 - 39
Gastrointestinal Catastrophes	11	9	14 - 57	14	57	9 - 60
Infectious Disease	12	58	19 - 71	14	36	17 - 66
Metabolic/Electrolyte Disorders	37	49	18 - 54	34	21	16 - 48
Pulmonary Disease	71	28	14 - 37	78	15	17 - 36
Renal Failure	13	31	7 - 67	18	22	10 - 65
Severe Acute Heart Disease	23	30	22 - 60	38	45	22 - 54
Severe Chronic Heart Disease	144	8	15 - 26	136	9	16 - 28
Severe Trauma	13	46	7 - 61	13	31	7 - 60
Gastrointestinal Disease	113	4	1 - 11	137	2	0 - 9
Gynecologic Disease	28	0	0 -100	33	0	0 - 70
Low-Risk Heart Disease	229	1	1 - 5	233	2	1 - 6
Musculoskeletal/Skin Conditions	190	4	0 - 9	199	3	0 - 8
Neuropsychiatric/Sensory Disease	152	1	0 - 8	153	1	0 - 6
Urologic Disease	82	0	0 - 9	139	1	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	1,044
Occupancy Rate (%):	66
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	400
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	459
Registered Nurses:	1,281
Licensed Practical Nurses:	298

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COPLEY MEMORIAL HOSPITAL

LINCOLN AND WESTON AVES
AURORA, IL 60507

Medicare Hospital Provider Number: 140029

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,551	13	10 - 15	1,620	13	11 - 16
Cancer	70	51	31 - 58	88	41	31 - 56
Cerebrovascular Accidents	53	26	18 - 43	74	15	19 - 38
Gastrointestinal Catastrophes	7	14	12 - 69	10	40	10 - 67
Infectious Disease	20	40	20 - 63	12	50	17 - 70
Metabolic/Electrolyte Disorders	19	16	9 - 48	11	18	7 - 57
Pulmonary Disease	75	27	16 - 39	74	24	16 - 38
Renal Failure	8	63	13 - 79	11	36	12 - 74
Severe Acute Heart Disease	52	42	24 - 52	65	49	27 - 52
Severe Chronic Heart Disease	61	20	13 - 34	87	30	14 - 35
Severe Trauma	4	25	3 - 80	4	25	2 - 82
Gastrointestinal Disease	112	0	2 - 6	108	2	1 - 9
Gynecologic Disease	18	0	0 -100	16	6	0 -100
Low-Risk Heart Disease	167	5	2 - 10	173	1	2 - 6
Musculoskeletal/Skin Conditions	171	4	0 - 10	181	2	1 - 6
Neuropsychiatric/Sensory Disease	37	5	0 - 72	50	0	0 - 14
Urologic Disease	60	7	0 - 35	71	4	0 - 26

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	215
Occupancy Rate (%):	57
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	163
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	0
Registered Nurses:	170
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Copley cares...

GREGORY W. LINTJER
President

COPLEY MEMORIAL HOSPITAL

Lincoln and Weston Aves. • Aurora, IL 60505 • (312) 844-1000

October 21, 1988

Medicare Provder #
14-0029

Mrs. Sandra Kappert
Health Standards and Quality Bureau
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Copley Memorial Hospital
Comments regarding HCFA Mortality Data

Dear Mrs. Kappert:

Pursuant to Department of Health and Human Services Administrator Dr. William Roper's correspondence to hospital administrators dated September 15, 1988 regarding HCFA's planned December public release of hospital specific mortality data, Copley Memorial Hospital would like to submit the following comments:

- The Health Care Financing Administration (HCFA), which publishes this information, cautions that mortality data by itself is not a complete measure of the quality of care at an individual hospital. While HCFA does believe that information on mortality rates is useful, until additional statistical measures to deal with complex issues such as severity of illness have been developed, it cannot and does not recommend the use of the information by itself to make judgements about the quality of care in an individual hospital or to make comparisons among hospitals.

- HCFA mortality statistics, viewed in isolation, do not measure hospital performance, and may, in fact, distort a hospital's mortality incidence. If, for example, a patient is admitted to a hospital for a hip replacement and (unfortunately) dies of a heart attack within 30 days of that admission, this event would be reflected in HCFA mortality data collected for the diagnostic category within which the hip replacement procedure falls, even though the cause of death, in this case, is not related to the reason for the admission.



- The American Hospital Association, the Illinois Hospital Association, the Joint Commission on the Accreditation of Healthcare Organizations, and Copley Memorial Hospital have concluded that "clinical or outcome 'indicators' are not direct measures of quality, but can only be used to identify possible problem areas for peer review."

- A critical component of Copley's quality assurance program involves our personal review of each patient's care requirements to ensure that the care given is appropriate and effective.

- Additionally, our quality assurance program identifies problems, provides solutions, and prevents recurrence of problems which could affect the quality of our patient outcomes.

- In conclusion, Copley will maintain its quality assurance efforts in order to ensure that its patient outcomes continue to be at or above industry standards.

While we oppose the release of hospital specific mortality data, we appreciate the opportunity to have our comments regarding this information become part of the public record.

Sincerely,

Gregory W. Lintjer
President

ksp

CRAWFORD MEMORIAL HOSPITAL

1000 N ALLEN
ROBINSON , IL 62454

Medicare Hospital Provider Number: 140190

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	599	19	11 - 19	636	15	9 - 16
Cancer	13	69	23 - 71	10	70	22 - 76
Cerebrovascular Accidents	26	46	12 - 50	18	67	14 - 57
Gastrointestinal Catastrophes	1	100	3 - 98	4	25	10 - 83
Infectious Disease	9	44	14 - 73	9	56	18 - 77
Metabolic/Electrolyte Disorders	10	20	3 - 60	15	33	7 - 56
Pulmonary Disease	62	44	18 - 45	45	9	13 - 34
Renal Failure	5	80	17 - 87	5	60	12 - 86
Severe Acute Heart Disease	26	58	28 - 66	28	46	23 - 59
Severe Chronic Heart Disease	51	37	15 - 42	44	30	9 - 38
Severe Trauma	5	0	6 - 65	0	-	-
Gastrointestinal Disease	74	0	1 - 8	69	3	0 - 16
Gynecologic Disease	4	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	83	2	1 - 11	107	4	1 - 11
Musculoskeletal/Skin Conditions	28	7	0 - 43	53	2	0 - 17
Neuropsychiatric/Sensory Disease	20	0	0 - 79	18	0	0 - 77
Urologic Disease	5	0	0 -100	9	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	107
Occupancy Rate (%):	61
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	16
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	43
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CROSSROADS COMMUNITY HOSPITAL

8 DOCTORS PARK ROAD
MT VERNON, IL 62864

Medicare Hospital Provider Number: 140294

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	403	11	10 - 17	385	11	9 - 17
Cancer	5	100	26 - 82	10	60	19 - 74
Cerebrovascular Accidents	12	8	12 - 51	10	20	7 - 58
Gastrointestinal Catastrophes	1	100	2 - 97	1	0	0 - 98
Infectious Disease	7	29	12 - 74	14	7	19 - 56
Metabolic/Electrolyte Disorders	24	33	10 - 50	10	20	6 - 60
Pulmonary Disease	36	33	17 - 49	27	26	9 - 44
Renal Failure	1	0	1 - 97	1	100	2 - 97
Severe Acute Heart Disease	16	50	22 - 68	13	31	22 - 70
Severe Chronic Heart Disease	24	4	15 - 37	27	19	12 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	54	0	1 - 10	40	2	0 - 23
Gynecologic Disease	0	-	-	6	0	0 -100
Low-Risk Heart Disease	56	4	1 - 16	34	0	1 - 15
Musculoskeletal/Skin Conditions	36	0	0 - 20	49	6	0 - 47
Neuropsychiatric/Sensory Disease	10	0	0 - 92	6	0	0 -100
Urologic Disease	12	0	0 -100	12	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	55
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	38
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

DECATUR MEMORIAL HOSPITAL

2300 NORTH EDWARD STREET
DECATUR, IL 62526

Medicare Hospital Provider Number: 140135

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,595	14	11 - 15	2,696	13	11 - 15
Cancer	122	47	34 - 56	135	50	33 - 55
Cerebrovascular Accidents	104	31	18 - 38	93	23	17 - 36
Gastrointestinal Catastrophes	18	44	12 - 59	31	35	24 - 61
Infectious Disease	29	31	18 - 54	23	30	20 - 60
Metabolic/Electrolyte Disorders	38	21	13 - 44	30	17	13 - 45
Pulmonary Disease	135	26	17 - 35	116	24	17 - 36
Renal Failure	9	33	11 - 75	8	38	16 - 82
Severe Acute Heart Disease	92	36	27 - 49	88	45	29 - 52
Severe Chronic Heart Disease	127	28	16 - 33	118	24	17 - 34
Severe Trauma	11	45	7 - 64	6	50	3 - 76
Gastrointestinal Disease	197	4	2 - 9	221	4	2 - 8
Gynecologic Disease	28	0	0 -100	31	0	0 -100
Low-Risk Heart Disease	233	3	2 - 7	243	3	2 - 7
Musculoskeletal/Skin Conditions	320	2	2 - 6	297	4	2 - 7
Neuropsychiatric/Sensory Disease	93	0	1 - 7	129	3	0 - 11
Urologic Disease	128	2	1 - 8	113	0	1 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	366
Occupancy Rate (%):	66
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	97
Percent of Physicians Who Are Board Certified Specialists:	74
Interns and Residents:	6
Registered Nurses:	198
Licensed Practical Nurses:	114

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

DELNOR COMMUNITY HOSPITAL

416 S 2ND ST
GENEVA, IL 60134

Medicare Hospital Provider Number: 140211

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	643	13	10 - 16	686	11	9 - 15
Cancer	14	50	18 - 68	16	38	18 - 65
Cerebrovascular Accidents	19	16	12 - 48	35	31	17 - 48
Gastrointestinal Catastrophes	4	50	4 - 82	6	17	12 - 74
Infectious Disease	10	50	10 - 67	9	44	12 - 71
Metabolic/Electrolyte Disorders	27	30	9 - 48	17	24	7 - 51
Pulmonary Disease	31	29	18 - 51	30	40	11 - 47
Renal Failure	4	25	7 - 84	1	100	3 - 99
Severe Acute Heart Disease	27	37	22 - 59	25	36	21 - 59
Severe Chronic Heart Disease	51	16	12 - 34	38	11	12 - 34
Severe Trauma	0	-	-	1	0	0 - 98
Gastrointestinal Disease	72	3	1 - 14	75	1	1 - 10
Gynecologic Disease	4	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	73	4	1 - 15	95	2	1 - 10
Musculoskeletal/Skin Conditions	66	0	0 - 10	58	2	0 - 22
Neuropsychiatric/Sensory Disease	20	5	0 - 54	21	5	0 - 82
Urologic Disease	25	4	0 - 90	20	5	0 - 93

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	108
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	64
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

DELNOR HOSPITAL

975 N 5TH AVE
ST CHARLES, IL 60174

Medicare Hospital Provider Number: 140154

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	587	11	10 - 16	584	13	9 - 16
Cancer	27	37	17 - 55	20	40	22 - 65
Cerebrovascular Accidents	26	27	13 - 47	22	41	13 - 54
Gastrointestinal Catastrophes	3	67	7 - 88	5	20	7 - 75
Infectious Disease	8	50	11 - 73	7	43	7 - 72
Metabolic/Electrolyte Disorders	11	18	8 - 58	14	14	5 - 50
Pulmonary Disease	26	19	10 - 43	22	41	14 - 55
Renal Failure	1	0	1 - 97	2	100	4 - 89
Severe Acute Heart Disease	24	17	25 - 57	27	41	21 - 58
Severe Chronic Heart Disease	41	20	12 - 37	39	15	12 - 37
Severe Trauma	1	0	0 - 98	1	0	1 - 97
Gastrointestinal Disease	45	0	1 - 12	54	6	0 - 22
Gynecologic Disease	5	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	62	3	1 - 15	64	3	1 - 15
Musculoskeletal/Skin Conditions	76	1	0 - 11	67	0	1 - 8
Neuropsychiatric/Sensory Disease	22	0	0 - 49	16	0	0 - 82
Urologic Disease	16	6	0 -100	16	13	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	105
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	108
Licensed Practical Nurses:	1

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

DOUGLAS COUNTY JARMEN MEM HOSP

704 NORTH MAIN ST
TUSCOLA, IL 61953

Medicare Hospital Provider Number: 140232

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	183	9	7 - 16	227	21	9 - 20
Cancer	1	100	0 - 98	4	25	8 - 81
Cerebrovascular Accidents	3	33	3 - 86	7	43	9 - 72
Gastrointestinal Catastrophes	1	0	0 -100	3	33	1 - 88
Infectious Disease	0	-	-	1	0	0 -100
Metabolic/Electrolyte Disorders	5	40	1 - 82	4	25	1 - 85
Pulmonary Disease	21	14	15 - 48	32	41	12 - 47
Renal Failure	0	-	-	5	60	15 - 90
Severe Acute Heart Disease	2	0	8 - 92	8	63	21 - 80
Severe Chronic Heart Disease	11	18	9 - 57	12	42	6 - 60
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	22	9	0 - 77	32	0	0 - 25
Gynecologic Disease	4	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	17	0	0 - 63	18	11	0 - 97
Musculoskeletal/Skin Conditions	19	11	0 - 50	21	0	0 - 34
Neuropsychiatric/Sensory Disease	3	0	0 -100	1	100	0 -100
Urologic Disease	11	0	0 - 98	11	9	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	43
Occupancy Rate (%):	28
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	22
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

DOUGLASJARMAN

October 18, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2 - D - 2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

In response to the proposed presentation of selected mortality data to the public, we would like to submit the following comments, even though with one exception our statistics are within the limits of your "predicted range".

As indicated on the Mortality Information Report there were thirty-five (35) deaths listed, eleven (11) patients which had the same discharge date and date of death. However, for seven (7) of these patients, the principal diagnosis and the actual cause of death (as recorded by the attending physician on the medical record) are not the same, i.e. a patient was admitted with a diagnosis of Cellulitis of the foot and the cause of death was due to a Pulmonary Embolism. In addition, the report indicates the date of death for eighteen (18) patients who expired after thirty (30) days from the last discharge date in 1987. The cause of death for sixteen (16) of these patients is unknown as they expired elsewhere than at this hospital.

As in 1987, the 1988 mortality data appears to over emphasize a death that a hospital has no control of post-discharge and an inpatient cause of death unrelated to the principal diagnosis for the patient's hospitalization.

Thus, even in a comparative analysis, the present mortality between hospitals is, in our opinion, not representative of the actual mortality rate related to principal diagnosis.

We appreciate the opportunity to comment on this proposed release of information and to have our comments published with the data.

Sincerely,

Mark F. Fedyk
Administrator

DR JOHN WARNER HOSPITAL

422 W WHITE STREET
CLINTON, IL 61727

Medicare Hospital Provider Number: 140146

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	377	12	8 - 16	424	12	9 - 16
Cancer	1	100	1 - 97	2	100	12 - 98
Cerebrovascular Accidents	11	55	8 - 63	17	53	14 - 59
Gastrointestinal Catastrophes	1	100	1 - 97	1	100	2 -100
Infectious Disease	6	0	18 - 69	7	43	16 - 80
Metabolic/Electrolyte Disorders	5	20	3 - 75	2	0	1 - 90
Pulmonary Disease	21	24	12 - 50	31	26	14 - 47
Renal Failure	2	50	6 - 95	1	0	1 - 97
Severe Acute Heart Disease	17	41	22 - 66	15	47	19 - 67
Severe Chronic Heart Disease	22	27	10 - 47	20	30	12 - 52
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	47	0	1 - 11	45	2	0 - 19
Gynecologic Disease	3	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	57	4	1 - 16	66	5	1 - 16
Musculoskeletal/Skin Conditions	37	3	0 - 73	46	2	0 - 19
Neuropsychiatric/Sensory Disease	7	0	0 -100	11	0	0 - 78
Urologic Disease	10	10	0 -100	12	8	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	52
Occupancy Rate (%):	39
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	6
Percent of Physicians Who Are Board Certified Specialists:	17
Interns and Residents:	0
Registered Nurses:	28
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

EDGEWATER HOSPITAL

5700 N ASHLAND AVENUE
CHICAGO, IL 60660

Medicare Hospital Provider Number: 140087

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,645	13	13 - 17	1,672	12	13 - 17
Cancer	32	47	26 - 62	36	53	30 - 64
Cerebrovascular Accidents	65	22	18 - 39	62	26	20 - 43
Gastrointestinal Catastrophes	15	47	17 - 66	15	33	19 - 66
Infectious Disease	46	30	26 - 56	44	39	26 - 58
Metabolic/Electrolyte Disorders	25	32	14 - 53	27	19	13 - 48
Pulmonary Disease	94	30	24 - 45	92	33	25 - 46
Renal Failure	6	33	13 - 84	5	20	14 - 85
Severe Acute Heart Disease	82	45	33 - 56	88	49	35 - 57
Severe Chronic Heart Disease	111	22	17 - 33	86	22	16 - 35
Severe Trauma	4	0	11 - 75	5	40	6 - 78
Gastrointestinal Disease	120	2	2 - 8	120	1	2 - 7
Gynecologic Disease	7	0	0 -100	7	0	0 - 98
Low-Risk Heart Disease	303	1	2 - 6	298	2	2 - 6
Musculoskeletal/Skin Conditions	160	6	1 - 11	148	2	1 - 8
Neuropsychiatric/Sensory Disease	26	0	0 - 39	49	6	0 - 30
Urologic Disease	34	3	0 - 71	44	5	0 - 35

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	328
Occupancy Rate (%):	48
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	131
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	26
Registered Nurses:	384
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Mazel Medical Center

Rosenfield Intensive Care Institute

Edgewater Hospital

5700 North Ashland Avenue, Chicago, Illinois 60660-4086 (312) 878-6000

Richard L. Stensrud
President

Steve Drucker
Executive Vice President

J. Goldflies, M.D.
Medical Director

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kapport
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kapport:

We have reviewed the Medicare Mortality Statistics and the demograhical information regarding Edgewater Hospital and have discovered some errors under the hospital descriptive characteristics. 1986 hospital statistics should reflect that Edgewater had 346 staffed beds and an occupancy rate of 51%. Furthermore, we had 329 physicians, 64% of which were board certified. Please also note that Edgewater Hospital has the following specialty services:

Hyperbaric/Pulmonary Medicine
Laser Surgery
Open Heart Surgery
Peripheral Vascular Medicine
Radiation Therapy
Renal Dialysis

The following is Edgewater Hospital's public statement to be published with the 1987 Medicare mortality statistics:

Although Edgewater Hospital's Medicare mortality statistics are all well within the normal range, it is important to stress that these mortality statistics alone are not a complete measure of quality care. We believe that the following factors should also be considered when evaluating a hospital's medical care:

- Competence and Dedication of the Medical Staff
- Professionalism of the Nursing and Support Personnel

- Availability of State-of-the-Art Equipment and a Comprehensive Range of Services
- Commitment to a Continuing Medical Education Program
- Presence of an Effective Quality Assurance Program

In addition, one must consider the severity of illness and the average age of patients treated in a given hospital when reviewing mortality statistics.

To exclude the above factors when evaluating the quality of care is inappropriate and unjust.

Sincerely,

Michael L. Naiman

Michael L. Naiman
Director of Planning and Development

CC: S. Drucker
R. Ehmen

EDWARD A UTLAUT MEM HOSP

GRIGG & HWY 140
GREENVILLE, IL 62246

Medicare Hospital Provider Number: 140137

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	404	14	10 - 17	432	15	11 - 19
Cancer	9	11	13 - 61	8	50	18 - 79
Cerebrovascular Accidents	14	14	13 - 52	23	22	14 - 49
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	5	20	7 - 75	6	50	6 - 75
Metabolic/Electrolyte Disorders	7	29	9 - 71	17	6	12 - 45
Pulmonary Disease	38	21	16 - 44	46	28	13 - 41
Renal Failure	2	100	8 - 92	9	56	14 - 79
Severe Acute Heart Disease	20	15	25 - 58	25	48	25 - 63
Severe Chronic Heart Disease	37	30	11 - 41	33	24	10 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	29	3	0 - 50	30	0	0 - 29
Gynecologic Disease	7	14	0 -100	6	0	0 -100
Low-Risk Heart Disease	54	7	0 - 25	44	5	1 - 21
Musculoskeletal/Skin Conditions	30	7	0 - 65	36	8	0 - 59
Neuropsychiatric/Sensory Disease	5	0	0 -100	11	9	0 -100
Urologic Disease	16	6	0 - 91	16	6	0 - 96

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	201
Occupancy Rate (%):	77
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	10
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	36
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

EDWARD HOSPITAL

801 SOUTH WASHINGTON
NAPERVILLE, IL 60566

Medicare Hospital Provider Number: 140231

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,039	12	11 - 16	985	13	11 - 16
Cancer	29	52	23 - 60	31	45	26 - 62
Cerebrovascular Accidents	33	18	16 - 44	52	21	16 - 40
Gastrointestinal Catastrophes	9	22	13 - 68	5	20	7 - 75
Infectious Disease	18	17	16 - 54	17	35	19 - 64
Metabolic/Electrolyte Disorders	18	11	12 - 48	16	31	8 - 55
Pulmonary Disease	85	26	19 - 40	79	33	19 - 42
Renal Failure	6	67	9 - 80	7	14	17 - 80
Severe Acute Heart Disease	33	52	25 - 59	34	47	23 - 57
Severe Chronic Heart Disease	56	30	15 - 40	63	19	14 - 35
Severe Trauma	3	0	5 - 80	1	0	0 - 97
Gastrointestinal Disease	102	4	1 - 12	82	5	0 - 17
Gynecologic Disease	6	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	114	1	2 - 7	122	2	1 - 9
Musculoskeletal/Skin Conditions	107	0	1 - 6	111	2	0 - 10
Neuropsychiatric/Sensory Disease	23	0	0 - 55	14	0	0 - 99
Urologic Disease	38	3	0 - 25	22	5	0 - 62

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	166
Occupancy Rate (%):	61
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	168
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	0
Registered Nurses:	179
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ELGIN STATE HOSP-MED & SURG DIV

750 S STATE ST
ELGIN, IL 60120

Medicare Hospital Provider Number: 140249

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	23	0	1 - 22	54	0	0 - 13
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	1	0	0 -100
Pulmonary Disease	4	0	0 - 81	1	0	0 -100
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	1	0	0 -100	0	-	-
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	1	0	0 -100	0	-	-
Gynecologic Disease	0	-	-	1	0	0 -100
Low-Risk Heart Disease	0	-	-	2	0	0 -100
Musculoskeletal/Skin Conditions	4	0	0 -100	10	0	0 -100
Neuropsychiatric/Sensory Disease	4	0	0 -100	17	0	0 -100
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	824
Ownership/Control:	State Government

STAFFING

Interns and Residents:	0
Registered Nurses:	17
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	Yes

Illinois Department of
Mental Health and
Developmental Disabilities

Elgin Mental Health Center

October 17, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Subject: Hospital I.D. 140249

Dear Mrs. Kappert:

The statement of the hospital characteristics for calendar years 1986 and 1987 is not accurate. I am also checking with the American Hospital Association to correct their data records.

Specific corrections are:

- While the total facility beds number 824, the Medicare certified beds were 80 until January 31, 1987 when the facility closed operation of 40 of these beds for acute medical services, leaving 40 beds certified. For your future use, the remaining 40 beds were also discontinued for acute medical services effective April 1, 1988. All acute medical services are now provided at a community general medical/surgical hospital whenever this psychiatric facility's patients require medical emergency or medical/surgical treatment services. None of the 824 beds are currently Medicare certified. The staffing reports are therefore accordingly modified, based on the 1987 profile as follows for 40 beds certified.

  Staffing:

  Interns and Residents per bed 0.00
  Registered Nurses per bed 8.00 (correction)
  Licensed Practical Nurses per bed 0.00

750 South State Street
Elgin, Illinois 60123-7692
312-742-1040

Specialty Services:

Shock/Trauma or Burn Unit: No (correction)
Coronary Care Unit: No (correction)
Acute Renal Dialysis Unit: No (correction)
Hospice Care: No (correction)

If you have any questions regarding this information please contact my office.

Sincerely,

Roalda J. Alderman, FACHE
Facility Director

RJA:vlh

ELMHURST MEMORIAL HOSPITAL

200 BERTEAU AVE
ELMHURST, IL 60126

Medicare Hospital Provider Number: 140200

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,217	12	11 - 15	3,054	13	12 - 16
Cancer	118	42	32 - 54	119	45	30 - 52
Cerebrovascular Accidents	149	21	21 - 36	134	19	20 - 36
Gastrointestinal Catastrophes	30	43	17 - 56	33	33	22 - 58
Infectious Disease	53	45	24 - 54	74	34	24 - 51
Metabolic/Electrolyte Disorders	57	35	17 - 47	59	17	17 - 43
Pulmonary Disease	184	27	18 - 35	200	28	18 - 35
Renal Failure	14	50	24 - 83	14	50	16 - 76
Severe Acute Heart Disease	119	37	29 - 49	113	44	31 - 52
Severe Chronic Heart Disease	144	24	13 - 29	171	21	15 - 29
Severe Trauma	6	17	6 - 70	7	43	7 - 73
Gastrointestinal Disease	302	2	1 - 6	250	2	1 - 7
Gynecologic Disease	18	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	385	3	2 - 6	347	3	2 - 7
Musculoskeletal/Skin Conditions	321	2	1 - 6	251	4	1 - 8
Neuropsychiatric/Sensory Disease	85	1	1 - 10	84	2	0 - 13
Urologic Disease	142	2	0 - 11	125	3	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	384
Occupancy Rate (%):	77
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	229
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	0
Registered Nurses:	464
Licensed Practical Nurses:	15

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Provider No. 140200

Elmhurst Memorial Hospital

COMMENTS ON THE HCFA MORTALITY DATA
Submitted Friday - October 21, 1988

Introduction

Elmhurst Memorial Hospital is pleased to note that it has been identified as being well within normal mortality ranges nationwide for the sixteen disease categories defined by HCFA. This comes as no surprise to an institution that prides itself in providing services to the older adult population.

Response to Presentation of Data

Elmhurst Memorial Hospital is committed to caring for the entire family. As a community hospital, that commitment is evident in the range of services and quality of care provided to area residents. Mortality data, such as that released by HCFA, provides a less than complete view and perhaps misleading sense of the nature of the institution presented.

Medicare patients comprised approximately 27 percent of the total inpatient care rendered by Elmhurst Memorial Hospital during 1987. The hospital finds itself serving a population maturing in a manner consistent with national demographics.

Services for older adults are increasing in scope and breadth each year. Similarly, care provided to older adults and our ability to identify and respond to the special needs of this population attracts patients to Elmhurst Memorial Hospital.

Clinical Services Added

New services can have a significant impact on mortality data. Elmhurst Memorial Hospital added balloon angioplasty and open heart surgery during 1987. It is noteworthy that these sophisticated procedures were added to the mix of available services without adversely impacting mortality rates in related diagnostic areas, as identified by HCFA.

Commitment to Quality

Quality is an intangible commodity. It is not easily measured; it is certainly not something that can be packaged. Throughout the hospital, quality is being assessed on a regular basis, at the individual patient level, and through the peer review process--physicians reviewing physicians. This type of review provides multifaceted data: severity of illness, appropriateness

of treatment, sequence of events, disease process, outcome, etc., to measure quality of care which we at Elmhurst Memorial Hospital believe is very important.

Commitment to Excellence

Elmhurst Memorial Hospital has identified its services and care for the elderly as an area of excellence. A variety of programs promote nursing and medical staff awareness of the special needs of the elderly. Continuing medical education for physicians on staff frequently includes programs on the needs of older adults.

Our commitment to older adults also is evident in educational programs presented in locations where they gather, throughout DuPage County. Such programs explore issues such as Alzheimer's Disease, caring for a chronically ill partner, older adult nutritional needs, remaining physically fit, and much more.

Understanding the Needs of the Terminally Ill

Elmhurst Memorial Hospital's understanding of the unique needs of the terminally ill can be seen in its range of services. A comprehensive oncology program provides a full spectrum of services to cancer patients. An expanded Dialysis Unit attracts a larger than average number of chronic renal patients.

Our special approach to caring for terminally ill patients--in conjunction with Hospice of DuPage and our own Elmhurst Memorial Home Health Services--means that the hospital's acuity level is higher. Paralleling increased acuity is the number of patients who may be expected to die a short time after discharge, something not evident in HCFA's presentation of data.

Inherent to chronic disease or illness are the risks and the likelihood of increased mortality rates within the total body of patients treated. Recognizing this is important to understanding an institution's willingness to provide services not offered by other hospital's... in spite of the potential of attracting higher risk patients for care.

Closing Statement

While Elmhurst Memorial Hospital was identified as being well within the HCFA mortality ranges nationwide, the real issue remains how to identify for the health care consumer--the patient and patient's family--what the data really means.

Measuring overall hospital performance or quality on the basis of a sampling of older adults is simply not an appropriate basis for assessment. The health care consumer needs to recognize the intangible commodities of service, compassion, trust, and the relationship between physician and patient when making a choice for medical treatment.

EUREKA HOSPITAL

101 S MAJOR STREET
EUREKA, IL 61530

Medicare Hospital Provider Number: 140014

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	203	8	10 - 18	264	17	9 - 19
Cancer	2	100	1 - 89	7	43	12 - 75
Cerebrovascular Accidents	12	25	13 - 61	15	27	10 - 55
Gastrointestinal Catastrophes	2	100	11 - 95	4	0	4 - 71
Infectious Disease	1	0	1 - 97	6	50	18 - 85
Metabolic/Electrolyte Disorders	0	-	-	1	0	0 -100
Pulmonary Disease	23	4	14 - 38	15	40	12 - 59
Renal Failure	2	50	8 - 97	4	50	11 - 89
Severe Acute Heart Disease	10	40	19 - 74	13	77	24 - 70
Severe Chronic Heart Disease	12	8	7 - 47	10	10	9 - 54
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	23	0	0 - 69	23	0	0 - 64
Gynecologic Disease	4	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	22	0	0 - 55	32	3	0 - 29
Musculoskeletal/Skin Conditions	20	0	0 - 48	17	0	0 - 59
Neuropsychiatric/Sensory Disease	1	0	0 -100	0	-	-
Urologic Disease	2	0	0 -100	13	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	35
Ownership/Control:	Church

STAFFING

Interns and Residents:	0
Registered Nurses:	0
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

EVANSTON HOSPITAL GLENBROOK HOSPITAL

2650 RIDGE AVE
EVANSTON, IL 60201

Medicare Hospital Provider Number: 140010

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,776	11	11 - 15	4,706	10	11 - 14
Cancer	219	40	32 - 51	191	32	32 - 51
Cerebrovascular Accidents	158	25	21 - 37	166	18	21 - 36
Gastrointestinal Catastrophes	37	35	21 - 56	41	44	20 - 54
Infectious Disease	30	37	25 - 61	31	32	21 - 57
Metabolic/Electrolyte Disorders	60	37	14 - 44	41	37	15 - 49
Pulmonary Disease	202	29	21 - 38	206	25	20 - 36
Renal Failure	10	60	13 - 76	12	17	16 - 72
Severe Acute Heart Disease	219	29	32 - 48	187	31	35 - 52
Severe Chronic Heart Disease	195	21	19 - 32	177	18	17 - 31
Severe Trauma	9	33	8 - 68	14	36	9 - 61
Gastrointestinal Disease	372	2	2 - 6	382	2	2 - 6
Gynecologic Disease	20	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	543	4	2 - 6	531	3	2 - 6
Musculoskeletal/Skin Conditions	520	2	2 - 5	520	2	1 - 5
Neuropsychiatric/Sensory Disease	163	1	2 - 6	199	2	1 - 7
Urologic Disease	158	0	1 - 5	168	0	1 - 5

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	544
Occupancy Rate (%):	83
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	542
Percent of Physicians Who Are Board Certified Specialists:	85
Interns and Residents:	0
Registered Nurses:	751
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

The Evanston Hospital
Owned and Operated by the
Evanston Hospital Corporation

2650 Ridge Avenue
Evanston, Illinois 60201
312 492 2000

October 12, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Health Standards & Quality Bureau
Meadows East Building 2-D-2
6325 Security Blvd.
Baltimore, Maryland 21207

Reference: Mortality Data
Medicare Provider Number 14-0010

Dear Mr. Roper:

The Evanston Hospital Corporation's mortality data for 1987 was very favorable. In previous correspondence we have outlined the comprehensiveness of our Quality Assurance Program and noted the thirteen quality of care indicators that are used to monitor the outcomes of care at the Evanston Hospital Corporation. Together these thirteen indicators of care, along with the mortality data provides a much more balanced view and meaningful understanding of the level of the quality of care provided at our hospitals.

We specifically want to point out that the hospital characteristic data for our hospitals was incorrect. Attached you will find the correct data for the Evanston Hospital Corporation for the year 1987.

Sincerely yours,

Raymond Grady
Sr. Vice President

RG/tb
Enclosure

A Member of the
McGaw Medical Center
of Northwestern University

FAIRBURY HOSPITAL

519 SOUTH 5TH STREET
FAIRBURY, IL 61739

Medicare Hospital Provider Number: 140039

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	287	12	12 - 20	324	11	12 - 20
Cancer	11	27	19 - 70	8	25	21 - 78
Cerebrovascular Accidents	11	18	12 - 60	16	13	16 - 52
Gastrointestinal Catastrophes	0	-	-	2	0	1 - 89
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	9	11	6 - 57	7	0	3 - 55
Pulmonary Disease	32	19	16 - 45	40	25	15 - 44
Renal Failure	2	100	4 - 89	2	50	5 - 94
Severe Acute Heart Disease	13	54	19 - 69	17	53	26 - 71
Severe Chronic Heart Disease	20	20	14 - 50	26	19	14 - 46
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	26	0	0 - 29	28	0	0 - 57
Gynecologic Disease	5	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	35	6	1 - 26	43	0	2 - 12
Musculoskeletal/Skin Conditions	33	0	1 - 16	25	4	0 - 46
Neuropsychiatric/Sensory Disease	5	0	1 - 72	6	0	0 -100
Urologic Disease	7	0	0 -100	9	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	117
Occupancy Rate (%):	66
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	9
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	30
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

FAIRFIELD MEMORIAL HOSPITAL

N W 11TH STREET
FAIRFIELD , IL 62837

Medicare Hospital Provider Number: 140138

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	338	19	11 - 20	378	13	10 - 17
Cancer	7	71	15 - 76	7	29	17 - 79
Cerebrovascular Accidents	13	38	10 - 60	17	29	7 - 51
Gastrointestinal Catastrophes	4	50	3 - 82	4	50	4 - 82
Infectious Disease	3	33	3 - 86	5	0	9 - 66
Metabolic/Electrolyte Disorders	6	0	2 - 60	12	33	9 - 61
Pulmonary Disease	59	32	14 - 40	33	21	11 - 42
Renal Failure	1	0	3 - 99	2	100	3 - 89
Severe Acute Heart Disease	18	33	21 - 64	21	29	21 - 60
Severe Chronic Heart Disease	13	23	9 - 56	21	29	7 - 47
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	30	7	0 - 62	38	0	0 - 15
Gynecologic Disease	0	-	-	9	0	0 -100
Low-Risk Heart Disease	40	2	0 - 25	53	2	1 - 13
Musculoskeletal/Skin Conditions	17	0	0 - 50	23	4	0 - 52
Neuropsychiatric/Sensory Disease	6	33	0 - 87	9	11	0 - 99
Urologic Disease	16	13	0 - 98	13	0	0 - 85

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	72
Occupancy Rate (%):	42
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	8
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	19
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

FAYETTE COUNTY HOSPITAL

7TH AND TAYLOR
VANDALIA, IL 62471

Medicare Hospital Provider Number: 140045

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	453	15	10 - 18	410	14	11 - 19
Cancer	7	57	20 - 84	5	80	10 - 77
Cerebrovascular Accidents	15	20	13 - 54	9	44	7 - 66
Gastrointestinal Catastrophes	3	67	9 - 90	2	50	3 - 92
Infectious Disease	3	33	5 - 87	7	14	8 - 66
Metabolic/Electrolyte Disorders	36	25	16 - 49	21	5	8 - 38
Pulmonary Disease	33	30	11 - 44	43	30	15 - 44
Renal Failure	3	33	4 - 87	0	-	-
Severe Acute Heart Disease	17	35	23 - 66	30	43	29 - 64
Severe Chronic Heart Disease	30	43	9 - 45	25	28	9 - 45
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	36	6	0 - 29	30	3	0 - 40
Gynecologic Disease	4	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	83	5	1 - 14	60	3	1 - 15
Musculoskeletal/Skin Conditions	29	7	0 - 47	15	7	0 - 93
Neuropsychiatric/Sensory Disease	8	0	0 -100	11	0	0 - 97
Urologic Disease	18	6	0 - 50	26	4	0 - 57

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	182
Occupancy Rate (%):	75
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	8
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	39
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

FERRELL HOSPITAL INC

1201 PINE STREET
ELDORADO, IL 62930

Medicare Hospital Provider Number: 140246

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	513	15	12 - 19	528	14	11 - 18
Cancer	13	54	23 - 74	18	50	22 - 67
Cerebrovascular Accidents	12	33	9 - 60	15	7	18 - 51
Gastrointestinal Catastrophes	9	56	13 - 72	5	60	8 - 80
Infectious Disease	10	40	10 - 66	9	33	18 - 75
Metabolic/Electrolyte Disorders	19	16	10 - 49	16	19	7 - 50
Pulmonary Disease	50	22	18 - 43	38	29	14 - 45
Renal Failure	5	60	12 - 86	7	43	11 - 80
Severe Acute Heart Disease	14	50	20 - 69	27	48	23 - 60
Severe Chronic Heart Disease	35	31	16 - 47	39	26	15 - 44
Severe Trauma	0	-	-	1	0	0 - 98
Gastrointestinal Disease	36	0	0 - 20	39	3	0 - 32
Gynecologic Disease	3	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	85	1	1 - 9	69	10	1 - 23
Musculoskeletal/Skin Conditions	31	3	0 - 50	35	0	0 - 20
Neuropsychiatric/Sensory Disease	19	0	0 - 64	14	0	0 - 81
Urologic Disease	8	13	0 -100	26	0	0 - 56

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	47
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

FOSTER G MCGAW HOSPITAL

2160 S 1ST ST
MAYWOOD, IL 60153

Medicare Hospital Provider Number: 140276

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,218	9	8 - 12	3,158	8	8 - 12
Cancer	150	42	31 - 52	150	33	30 - 51
Cerebrovascular Accidents	66	15	14 - 34	75	12	17 - 34
Gastrointestinal Catastrophes	20	35	16 - 59	30	43	19 - 58
Infectious Disease	14	21	14 - 59	12	42	16 - 69
Metabolic/Electrolyte Disorders	25	20	9 - 46	25	12	13 - 45
Pulmonary Disease	55	24	17 - 41	76	24	15 - 37
Renal Failure	18	11	2 - 58	13	15	6 - 63
Severe Acute Heart Disease	84	33	24 - 46	73	42	26 - 51
Severe Chronic Heart Disease	142	20	14 - 29	126	22	17 - 33
Severe Trauma	13	38	8 - 61	9	33	6 - 66
Gastrointestinal Disease	148	2	1 - 8	142	4	1 - 10
Gynecologic Disease	24	0	0 -100	25	0	0 -100
Low-Risk Heart Disease	765	5	2 - 6	804	2	3 - 5
Musculoskeletal/Skin Conditions	300	2	1 - 5	310	2	1 - 5
Neuropsychiatric/Sensory Disease	129	3	1 - 11	111	1	0 - 9
Urologic Disease	98	1	0 - 17	96	3	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	520
Occupancy Rate (%):	85
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	422
Percent of Physicians Who Are Board Certified Specialists:	86
Interns and Residents:	344
Registered Nurses:	931
Licensed Practical Nurses:	1

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

FOSTER G. McGAW HOSPITAL
LOYOLA UNIVERSITY OF CHICAGO
2160 South First Avenue, Maywood, Illinois 60153 312 531-3000

Medicare Provider Number 14-0276
Response to Health Care Financing Administration
Selected Mortality Data
Calendar Year 1987

Selected mortality statistics for 1987, as produced by the Health Care Financing Authority (HCFA), continue to support other indicators of the high quality of care provided at Foster G. McGaw Hospital of Loyola University of Chicago. The HCFA data reflects an extremely low overall mortality rate, as well as low rates for each of the 16 individual diagnostic groups. This further supports the consistent high quality care provided across the various medical disciplines available at Foster G. McGaw Hospital.

Foster G. McGaw Hospital continues to treat a patient mix that is among the country's highest for university teaching hospitals. Our capability to serve this critically ill population, while maintaining such unusually low mortality rates, attests to our dedication to quality. As in 1986, we were below the mean of the 1987 HCFA mortality rates for all but 3 of the 16 diagnostic groupings, and were well within the projected ranges in every group.

As complimentary as these figures may be, we continue to be concerned over the accuracy of the methodology used in calculating the HCFA data. These mortality rates do not accurately reflect severity of illness, appropriately account for a patient's condition upon transfer or the stage of a chronic patient's disease upon admission, or accommodate for Emergency Room (Trauma) admissions. These factors and others cause the methodology to overstate mortality rates, especially for tertiary hospitals. Foster G. McGaw Hospital's status as a Comprehensive Cancer Center and designated Trauma Center make it susceptible to these overstatements.

In summary, Foster G. McGaw Hospital provides high quality care to an extremely ill population. In reviewing these data, we question the methodology used by HCFA, and question the implication that mortality rates reflect quality care. Even with these limitations, HCFA data does corroborate other indicators of Foster G. McGaw Hospital's high quality of patient care.

FRANCISCAN MEDICAL CENTER

2701 17TH ST
ROCK ISLAND, IL 61201

Medicare Hospital Provider Number: 140280

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,699	12	9 - 13	1,651	10	8 - 13
Cancer	42	55	26 - 58	43	53	25 - 57
Cerebrovascular Accidents	60	12	17 - 35	50	22	17 - 42
Gastrointestinal Catastrophes	14	50	10 - 61	9	11	6 - 57
Infectious Disease	31	26	18 - 52	17	59	16 - 62
Metabolic/Electrolyte Disorders	20	15	9 - 47	22	14	13 - 48
Pulmonary Disease	74	20	15 - 36	94	26	16 - 36
Renal Failure	5	80	5 - 78	4	50	6 - 85
Severe Acute Heart Disease	80	39	28 - 52	56	27	26 - 51
Severe Chronic Heart Disease	87	23	14 - 34	63	29	12 - 35
Severe Trauma	2	50	5 - 93	2	0	4 - 89
Gastrointestinal Disease	134	3	1 - 9	114	5	0 - 14
Gynecologic Disease	10	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	171	1	1 - 6	188	2	1 - 7
Musculoskeletal/Skin Conditions	125	2	1 - 8	118	8	0 - 19
Neuropsychiatric/Sensory Disease	287	3	0 - 9	282	2	0 - 7
Urologic Disease	42	2	0 - 63	41	2	0 - 37

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	265
Occupancy Rate (%):	48
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	65
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	209
Licensed Practical Nurses:	1

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

FRANK CUNEO MEMORIAL HOSPITAL

750 W MONTROSE
CHICAGO, IL 60613

Medicare Hospital Provider Number: 140134

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	190	21	12 - 25	241	13	9 - 19
Cancer	4	100	16 - 79	3	33	4 - 86
Cerebrovascular Accidents	7	14	6 - 64	4	0	6 - 71
Gastrointestinal Catastrophes	1	100	1 - 97	2	100	3 - 88
Infectious Disease	14	50	18 - 68	6	0	18 - 68
Metabolic/Electrolyte Disorders	5	40	5 - 78	5	0	3 - 65
Pulmonary Disease	24	21	13 - 47	31	26	12 - 45
Renal Failure	1	0	3 - 98	2	0	0 - 94
Severe Acute Heart Disease	2	50	6 - 94	9	44	16 - 74
Severe Chronic Heart Disease	13	54	15 - 66	10	30	6 - 62
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	10	20	0 - 96	15	0	0 - 50
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	14	0	0 - 46	27	7	0 - 51
Musculoskeletal/Skin Conditions	18	6	0 - 88	16	13	0 - 72
Neuropsychiatric/Sensory Disease	3	0	0 -100	5	20	0 - 99
Urologic Disease	7	0	0 -100	8	13	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	106
Occupancy Rate (%):	59
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	59
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	41
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

FRANKLIN BLVD COMMUNITY HOSPITAL

3240 W FRANKLIN BLVD
CHICAGO, IL 60624

Medicare Hospital Provider Number: 140151

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	57	5	5 - 19	61	3	3 - 15
Cancer	0	-	-	1	0	1 - 97
Cerebrovascular Accidents	3	0	1 - 82	1	0	1 - 97
Gastrointestinal Catastrophes	2	50	0 - 97	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	2	100	9 - 93	2	50	2 - 92
Pulmonary Disease	1	0	0 -100	4	0	0 - 93
Renal Failure	0	-	-	1	0	0 - 98
Severe Acute Heart Disease	0	-	-	1	0	0 - 98
Severe Chronic Heart Disease	8	0	7 - 49	3	0	0 - 87
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	3	0	0 -100	5	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	11	0	0 - 98	12	0	0 - 77
Musculoskeletal/Skin Conditions	4	0	0 -100	10	0	0 - 98
Neuropsychiatric/Sensory Disease	3	0	0 -100	0	-	-
Urologic Disease	0	-	-	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	96
Occupancy Rate (%):	43
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	66
Percent of Physicians Who Are Board Certified Specialists:	61
Interns and Residents:	0
Registered Nurses:	38
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

FRANKLIN HOSPITAL

201 BAILEY LANE
BENTON, IL 62812

Medicare Hospital Provider Number: 140035

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	592	18	10 - 17	670	16	11 - 17
Cancer	17	65	24 - 69	17	71	30 - 73
Cerebrovascular Accidents	27	52	13 - 50	37	35	15 - 46
Gastrointestinal Catastrophes	5	60	8 - 79	4	50	11 - 86
Infectious Disease	2	0	2 - 88	6	50	7 - 75
Metabolic/Electrolyte Disorders	3	33	1 - 87	11	64	8 - 63
Pulmonary Disease	27	26	11 - 46	35	29	10 - 42
Renal Failure	8	38	14 - 80	2	50	6 - 95
Severe Acute Heart Disease	25	44	20 - 59	40	55	26 - 57
Severe Chronic Heart Disease	47	34	12 - 40	62	26	15 - 38
Severe Trauma	1	100	0 - 98	0	-	-
Gastrointestinal Disease	59	7	1 - 21	65	3	1 - 15
Gynecologic Disease	2	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	80	5	1 - 15	98	2	1 - 9
Musculoskeletal/Skin Conditions	75	3	1 - 13	66	2	0 - 15
Neuropsychiatric/Sensory Disease	17	0	0 - 89	13	8	0 -100
Urologic Disease	24	4	0 - 66	25	0	0 - 31

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	205
Occupancy Rate (%):	49
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	13
Percent of Physicians Who Are Board Certified Specialists:	85
Interns and Residents:	0
Registered Nurses:	31
Licensed Practical Nurses:	37

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

FREEPORT MEMORIAL HOSPITAL

1045 WEST STEPHENSON STREET
FREEPORT, IL 61032

Medicare Hospital Provider Number: 140160

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,641	11	9 - 13	1,631	12	9 - 13
Cancer	41	49	24 - 56	44	50	23 - 55
Cerebrovascular Accidents	47	28	17 - 43	63	32	18 - 42
Gastrointestinal Catastrophes	11	64	15 - 70	6	50	6 - 75
Infectious Disease	27	19	16 - 50	7	43	6 - 72
Metabolic/Electrolyte Disorders	37	30	11 - 45	38	21	11 - 43
Pulmonary Disease	79	19	20 - 40	70	23	16 - 38
Renal Failure	6	67	15 - 85	6	33	14 - 84
Severe Acute Heart Disease	57	49	25 - 52	59	46	25 - 52
Severe Chronic Heart Disease	68	18	13 - 32	86	23	13 - 33
Severe Trauma	5	60	5 - 78	0	-	-
Gastrointestinal Disease	157	8	1 - 12	143	8	1 - 13
Gynecologic Disease	23	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	198	3	1 - 7	205	4	1 - 8
Musculoskeletal/Skin Conditions	142	4	0 - 10	159	3	0 - 10
Neuropsychiatric/Sensory Disease	39	0	0 - 16	41	5	0 - 52
Urologic Disease	95	4	0 - 28	77	3	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	180
Occupancy Rate (%):	57
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	65
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	0
Registered Nurses:	123
Licensed Practical Nurses:	43

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Freeport Memorial Hospital
1045 WEST STEPHENSON STREET • FREEPORT, ILLINOIS 61032 • 815/235-4131

Freeport Memorial Hospital Provider Number 140160

October 19, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Blvd.
Baltimore, MD 21207

Dear Mrs. Kappert:

Freeport Memorial Hospital has received the mortality information that you have sent to us. On behalf of the Governing Body, Administration, Managers, and Medical Staff of Freeport Memorial Hospital I would like to respond to this information.

I would like to first clarify information in regards to the hospital characteristics listed. We currently consider ourselves 156 bed hospital rather than the 110 beds reflected. We have 110 general medical surgical beds. We also have, at present, 73% Board Certified Physicians rather then the 47% stated. We have approximately 47 Board Certified physicians. Freeport Memorial has maintained its rural referral center status and has, this year, received another 3 year accreditation from the Joint Commission.

Medicare patients are approximately 40% of our total patients and of these, 44% are admitted through our emergency room. Because we are a rural community, we felt the need to establish observation beds and respite beds to meet the needs of patients who are not acute care patients. We also have a 25 bed skilled nursing facility to provide further care to our patients after their acute care discharge.

Our mission is to provide excellent health care by using effective technology with genuine courtesy and compassion for the human needs of the people in our region. We are committed to improving the quality of life for those receiving and providing health care services by delivering cost effective services that ensure high quality health care for the present and future generations.

We have an active quality assurance program; we do 100% concurrent utilization review; and we have a strong risk management program. We have had excellent medical staff support which allows us to assure ongoing monitoring and evaluation of quality assurance. We have established quality indicators for the medical staff, one of which is mortality review. Mortalities are reviewed at 100%. Education programs are provided whenever a need is identified. Any necessary action identified out of a review is tracked through the Medical Executive Committee and on to the Board.

In review of the data we were able to identify and verify patients that expired here. It is not feasible to follow-up on all deaths within 30 days. We did identify 3 deaths within 30 days that expired with a different final diagnosis unrelated to their hospital admission. This, again, supports that this data is only one measure used in identifying quality of care issues.

We again, appreciate the ability to review the information provided prior to public release. We support your efforts to stress to the public that this is not a complete measure of the quality of care at an individual hospital.

Sincerely,

Dennis L. Hamilton

Dennis L. Hamilton
President

DLH:ja

GALENA-STRAUSS HOSPITAL

215 SUMMITT ST
GALENA, IL 61036

Medicare Hospital Provider Number: 140074

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	140	14	8 - 21	138	10	9 - 20
Cancer	1	0	2 - 97	1	0	0 - 98
Cerebrovascular Accidents	6	17	4 - 68	9	0	14 - 51
Gastrointestinal Catastrophes	2	0	3 - 88	1	100	3 - 98
Infectious Disease	2	100	7 - 91	0	-	-
Metabolic/Electrolyte Disorders	2	0	1 - 89	5	60	7 - 79
Pulmonary Disease	10	20	8 - 59	14	21	14 - 58
Renal Failure	1	0	0 - 99	0	-	-
Severe Acute Heart Disease	6	50	10 - 77	9	33	17 - 73
Severe Chronic Heart Disease	10	30	8 - 62	6	0	6 - 57
Severe Trauma	1	0	1 - 97	0	-	-
Gastrointestinal Disease	17	6	1 - 45	16	6	0 - 97
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	11	0	0 - 88	17	0	0 - 73
Musculoskeletal/Skin Conditions	9	0	0 -100	13	0	0 - 97
Neuropsychiatric/Sensory Disease	3	0	0 -100	1	0	0 -100
Urologic Disease	8	0	0 - 85	2	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	63
Occupancy Rate (%):	64
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	23
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	0
Registered Nurses:	12
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GALESBURG COTTAGE HOSPITAL

695 N KELLOGG ST
GALESBURG, IL 61401

Medicare Hospital Provider Number: 140040

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,399	14	10 - 15	1,529	12	10 - 14
Cancer	54	54	29 - 58	49	49	30 - 60
Cerebrovascular Accidents	51	39	17 - 44	45	31	17 - 45
Gastrointestinal Catastrophes	11	64	20 - 74	10	40	11 - 68
Infectious Disease	9	22	17 - 71	8	50	14 - 76
Metabolic/Electrolyte Disorders	27	30	10 - 48	27	19	10 - 45
Pulmonary Disease	70	24	16 - 38	74	34	20 - 44
Renal Failure	14	36	17 - 75	17	59	17 - 74
Severe Acute Heart Disease	37	46	25 - 57	38	37	25 - 56
Severe Chronic Heart Disease	72	31	12 - 35	89	29	15 - 35
Severe Trauma	2	50	5 - 94	1	0	1 - 97
Gastrointestinal Disease	121	4	1 - 11	154	3	1 - 8
Gynecologic Disease	12	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	182	5	2 - 9	176	1	2 - 6
Musculoskeletal/Skin Conditions	143	2	1 - 8	200	2	2 - 7
Neuropsychiatric/Sensory Disease	32	0	0 - 41	59	3	0 - 23
Urologic Disease	89	2	0 - 13	72	0	1 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	203
Occupancy Rate (%):	47
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	69
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	0
Registered Nurses:	129
Licensed Practical Nurses:	36

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

GATEWAY COMMUNITY HOSPITAL

1509 MARTIN LUTHER KING DR
EAST ST LOUIS, IL 62201

Medicare Hospital Provider Number: 140293

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	215	8	7 - 16	228	11	8 - 17
Cancer	1	100	2 - 97	1	100	0 -100
Cerebrovascular Accidents	12	17	8 - 53	8	38	7 - 68
Gastrointestinal Catastrophes	0	-	-	1	0	3 - 99
Infectious Disease	3	33	8 - 89	4	0	13 - 76
Metabolic/Electrolyte Disorders	16	13	11 - 51	19	32	15 - 58
Pulmonary Disease	5	20	7 - 74	8	13	5 - 59
Renal Failure	3	33	8 - 91	0	-	-
Severe Acute Heart Disease	4	50	6 - 83	6	33	5 - 73
Severe Chronic Heart Disease	9	11	8 - 57	11	36	5 - 60
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	15	0	0 - 77	7	0	0 - 80
Gynecologic Disease	0	-	-	1	0	0 -100
Low-Risk Heart Disease	31	0	0 - 25	35	0	0 - 18
Musculoskeletal/Skin Conditions	19	0	0 - 79	23	0	0 - 36
Neuropsychiatric/Sensory Disease	11	0	0 -100	14	0	0 - 91
Urologic Disease	9	11	0 - 99	9	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1985

Total Beds (#):	160
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	50
Licensed Practical Nurses:	40

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GIBSON COMMUNITY HOSPITAL

1120 NORTH MELVIN
GIBSON CITY, IL 60936

Medicare Hospital Provider Number: 140220

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	349	13	9 - 17	320	12	9 - 17
Cancer	4	100	27 - 91	7	71	18 - 79
Cerebrovascular Accidents	16	25	12 - 54	9	33	6 - 64
Gastrointestinal Catastrophes	3	33	4 - 86	1	100	0 - 99
Infectious Disease	4	0	10 - 74	3	33	4 - 86
Metabolic/Electrolyte Disorders	4	25	6 - 81	2	0	0 - 97
Pulmonary Disease	23	35	12 - 51	18	11	13 - 47
Renal Failure	2	100	10 - 95	2	100	10 - 95
Severe Acute Heart Disease	8	63	11 - 71	8	38	19 - 78
Severe Chronic Heart Disease	40	22	11 - 38	28	18	13 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	31	3	0 - 47	41	5	0 - 38
Gynecologic Disease	10	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	39	0	1 - 13	31	3	1 - 24
Musculoskeletal/Skin Conditions	19	0	0 - 50	21	5	0 - 82
Neuropsychiatric/Sensory Disease	3	33	0 -100	11	0	0 - 87
Urologic Disease	25	0	0 - 66	24	0	0 - 86

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	82
Occupancy Rate (%):	66
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	9
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	28
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GLENDALE HEIGHTS COMMUNITY HOSPITAL

1505 JILL COURT
GLENDALE HEIGHTS, IL 60137

Medicare Hospital Provider Number: 140292

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	407	22	14 - 23	417	24	15 - 24
Cancer	3	100	7 - 80	9	56	13 - 71
Cerebrovascular Accidents	23	30	18 - 55	16	31	13 - 57
Gastrointestinal Catastrophes	5	80	7 - 75	3	0	8 - 81
Infectious Disease	24	42	19 - 59	19	42	17 - 62
Metabolic/Electrolyte Disorders	9	56	7 - 67	11	45	7 - 64
Pulmonary Disease	55	35	17 - 44	65	45	20 - 46
Renal Failure	1	100	1 - 97	3	33	10 - 92
Severe Acute Heart Disease	14	43	19 - 67	24	42	24 - 62
Severe Chronic Heart Disease	25	32	13 - 49	28	29	13 - 47
Severe Trauma	0	-	-	1	100	2 - 97
Gastrointestinal Disease	15	0	0 - 40	17	12	0 - 56
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	41	5	1 - 22	34	9	1 - 32
Musculoskeletal/Skin Conditions	25	0	1 - 22	30	3	0 - 31
Neuropsychiatric/Sensory Disease	6	0	0 -100	7	0	0 -100
Urologic Disease	7	0	0 -100	13	0	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	122
Occupancy Rate (%):	62
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	113
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	98
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GOOD SAMARITAN HOSPITAL

605 N 12TH STREET
MOUNT VERNON, IL 62864

Medicare Hospital Provider Number: 140046

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,305	10	11 - 15	1,438	11	11 - 15
Cancer	39	33	29 - 61	41	54	30 - 62
Cerebrovascular Accidents	35	20	15 - 43	38	34	17 - 48
Gastrointestinal Catastrophes	6	0	15 - 66	4	75	7 - 82
Infectious Disease	36	31	24 - 57	25	28	16 - 54
Metabolic/Electrolyte Disorders	20	25	10 - 52	39	21	15 - 45
Pulmonary Disease	88	22	20 - 40	96	17	18 - 36
Renal Failure	16	25	15 - 70	20	30	24 - 78
Severe Acute Heart Disease	29	55	27 - 63	41	51	28 - 59
Severe Chronic Heart Disease	50	22	14 - 38	67	25	15 - 37
Severe Trauma	5	20	3 - 75	0	-	-
Gastrointestinal Disease	131	1	1 - 7	110	4	1 - 11
Gynecologic Disease	6	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	112	2	2 - 9	139	2	2 - 8
Musculoskeletal/Skin Conditions	167	2	2 - 8	193	1	1 - 6
Neuropsychiatric/Sensory Disease	64	2	1 - 13	76	0	1 - 8
Urologic Disease	108	2	1 - 9	71	1	1 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	160
Occupancy Rate (%):	68
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	45
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	0
Registered Nurses:	139
Licensed Practical Nurses:	37

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

GOOD SAMARITAN HOSPITAL

3815 HIGHLAND AVENUE
DOWNERS GROVE, IL 60515

Medicare Hospital Provider Number: 140288

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,196	12	9 - 13	1,836	12	9 - 14
Cancer	47	36	25 - 55	50	34	24 - 54
Cerebrovascular Accidents	66	36	16 - 40	62	31	16 - 41
Gastrointestinal Catastrophes	15	33	14 - 62	18	44	15 - 61
Infectious Disease	23	39	15 - 56	25	28	18 - 56
Metabolic/Electrolyte Disorders	24	13	10 - 43	21	29	11 - 52
Pulmonary Disease	146	33	18 - 36	111	24	18 - 37
Renal Failure	10	40	12 - 75	8	25	10 - 75
Severe Acute Heart Disease	81	43	27 - 50	68	50	27 - 52
Severe Chronic Heart Disease	121	29	15 - 33	114	22	16 - 33
Severe Trauma	6	50	5 - 75	3	0	6 - 80
Gastrointestinal Disease	166	4	1 - 9	146	1	1 - 7
Gynecologic Disease	24	0	0 -100	18	0	0 -100
Low-Risk Heart Disease	400	2	2 - 6	320	6	1 - 7
Musculoskeletal/Skin Conditions	168	2	1 - 7	168	2	1 - 7
Neuropsychiatric/Sensory Disease	66	3	0 - 24	57	0	0 - 13
Urologic Disease	61	2	0 - 22	58	0	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	301
Occupancy Rate (%):	75
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	347
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	0
Registered Nurses:	351
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

Evangelical Health Systems

Good Samaritan Hospital
3815 Highland Ave., Downers Grove, IL 60515 (312) 963-5900

ANALYSIS OF 1987 HCFA MORTALITY DATA

GOOD SAMARITAN HOSPITAL acknowledges receipt of HCFA's 1987 mortality data. We have thoroughly reviewed both 1987 and 1986 data, which HCFA recomputed using the 1987 updated model. The mortality rates for the 16 diagnostic categories in the 1986 data did not change with the recomputation and were therefore not reevaluated. Good Samaritan Hospital's actual 1987 mortality rates did not fall outside the predicted ranges for any of the 16 diagnostic-specific categories or the overall mortality category.

Good Samaritan Hospital also verified the hospital characteristics data against their response to the 1987 American Hospital Association Annual Survey. The hospital characteristics which were released with the HCFA mortality data are not consistent with the response reported to the AHA. The discrepancies included the following:

- Good Samaritan Hospital does have a mixed Intensive Care Unit / Coronary Care Unit. The "Beds and Utilization by Inpatient Service" Section of the AHA Survey requests bed size for a mixed ICU/CCU under item 7 and bed size for a separate CCU under item 8. It appears that only beds appearing in item 8 were included in the HCFA response.

- The number of beds at Good Samaritan Hospital is 301 rather than the 164 reported in the HCFA data.

Good Samaritan Hospital feels that mortality data can be appropriately used to guide or focus medical peer review. The decision was made to analyze categories where it appeared that the actual rate ranked higher than average in the predicted ranges.

After medical peer review, it was confirmed that the HCFA methodology was not able to account for several patient characteristics which contributed to the actual cause of death. For example, in the cerebrovascular accident category, the majority of patients were unresponsive on admission, and death was imminent. In the pulmonary disease category, the majority of patients were admitted from an extended care facility or from home where they were receiving formal home health care services. This demonstrates that their admission acuity was higher than that of the average patient.

It was also noted that current government guidelines for coding of clinical data forced cases with more substantial or acute conditions to be placed in a grouping with a lower expected mortality rate. For example, several patients with severe acute heart disease and underlying chronic cardiac conditions were admitted and coded as having a principal diagnosis of a chronic cardiac condition (i.e., admitted with ventricular tachycardia with congestive heart failure and known end-stage cardiomyopathy). This type of coding, which is mandated for payment mechanisms, is felt to bias mortality analysis in that the reason for admission may not have been the direct cause of death.

Related to the United Church of Christ

Our review also identified the following repeating factors throughout the various diagnostic categories:

- A significant number of patients were admitted in a severely compromised condition.
- Death was the expected outcome as a result of the stage of the patients' disease.
- A majority of the patients had more significant co-morbid conditions than the number included in HCFA's model.
- In cases where death occurred within 30 days of discharge, effective discharge planning was conducted, including placements to extended care facilities or with home health care services.

Thus, the factors which caused the actual mortality rates to fall into the upper end of the predicted ranges were patient-specific characteristics which made Good Samaritan admissions differ significantly from the "average" patient reflected in the HCFA data.

GOOD SAMARITAN HOSPITAL acknowledges the value of using mortality statistics as a mechanism with which to screen clinical data and identify areas which warrant a more in-depth focussed review. However, as stated by the JCAHO and AHA, Good Samaritan Hospital also is aware that statistical indicators are not direct measures of quality. As demonstrated by the above analysis, any determination about actual quality of patient care can only be made as part of a case-oriented medical peer review process.

GOOD SHEPHERD HOSPITAL

450 WEST HIGHWAY 22
BARRINGTON, IL 60010

Medicare Hospital Provider Number: 140291

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	950	13	10 - 15	995	10	10 - 15
Cancer	29	48	26 - 63	29	38	27 - 64
Cerebrovascular Accidents	37	22	14 - 42	26	15	13 - 43
Gastrointestinal Catastrophes	9	33	14 - 71	7	29	14 - 76
Infectious Disease	15	40	13 - 62	13	38	15 - 66
Metabolic/Electrolyte Disorders	18	33	8 - 54	17	24	7 - 52
Pulmonary Disease	67	22	16 - 39	67	18	15 - 36
Renal Failure	2	100	7 - 92	2	0	10 - 95
Severe Acute Heart Disease	35	31	26 - 57	38	37	27 - 58
Severe Chronic Heart Disease	46	26	11 - 37	54	26	16 - 40
Severe Trauma	1	0	1 - 97	3	33	2 - 87
Gastrointestinal Disease	73	0	1 - 8	64	0	1 - 9
Gynecologic Disease	8	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	101	5	1 - 12	113	2	2 - 8
Musculoskeletal/Skin Conditions	95	1	1 - 9	115	3	1 - 11
Neuropsychiatric/Sensory Disease	42	5	0 - 76	38	3	0 - 41
Urologic Disease	51	2	0 - 40	38	0	0 - 25

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	162
Occupancy Rate (%):	62
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	132
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	0
Registered Nurses:	191
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Evangelical Health Systems

Good Shepherd Hospital
450 West Highway 22, Barrington, Illinois 60010 (312) 381-9600

ANALYSIS OF 1987 HCFA MORTALITY DATA

GOOD SHEPHERD HOSPITAL acknowledges receipt of HCFA's 1987 mortality data. We have thoroughly reviewed both 1987 and 1986 data, which HCFA recomputed using the 1987 updated model. The mortality rates for the 16 diagnostic categories in the 1986 data did not change with the recomputation and were therefore not reevaluated.

All of Good Shepherd Hospital's actual mortality rates by diagnostic category were within or well below the predicted mortality ranges, with the exception of the renal failure category. The actual number of patients in this category as reported by HCFA was two, which does not represent a significant statistical sample. Medical review of these cases revealed that both of these patients were terminal or on a "do not resuscitate" status at the time of admission, and were treated conservatively at the request of the patient/patient's family. Upon physician review, it was determined that both of these cases were appropriately assigned terminal or "do not resuscitate" status, given the condition of the patients.

After medical peer review, it was confirmed that the HCFA methodology was not able to account for the severity of the patients' illnesses at the time of admission to the hospital.

Good Shepherd Hospital also verified the hospital characteristics data against our response to the 1987 American Hospital Association Annual Survey. The hospital characteristics which were released with the HCFA mortality data are not consistent with the response reported to the AHA. The discrepancies included the following:

- Good Shepherd Hospital does have a mixed Intensive Care Unit / Coronary Care Unit. The "Beds and Utilization by Inpatient Service" Section of the AHA Survey requests bed size for a mixed ICU/CCU under item 7 and bed size for a separate CCU under item 8. It appears that only beds appearing in item 8 were included in the HCFA response.

- The number of beds at Good Shepherd Hospital is 162 rather than the 120 as reported in the HCFA data.

GOOD SHEPHERD HOSPITAL acknowledges the value of using mortality statistics as a mechanism with which to screen clinical data and identify areas which warrant a more in-depth focussed review. However, as stated by the JCAHO and AHA, Good Shepherd Hospital also is aware that statistical indicators are not direct measures of quality. As demonstrated by the above analysis, any determination about actual quality of patient care can only be made as part of a case-oriented medical peer review process.

GOTTLIEB MEMORIAL HOSPITAL

701 WEST NORTH AVE
MELROSE PARK, IL 60160

Medicare Hospital Provider Number: 140008

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,743	12	10 - 15	1,698	11	9 - 14
Cancer	48	27	26 - 55	62	45	31 - 59
Cerebrovascular Accidents	72	26	16 - 38	67	27	17 - 40
Gastrointestinal Catastrophes	16	31	13 - 59	11	36	14 - 68
Infectious Disease	28	29	20 - 56	10	20	16 - 67
Metabolic/Electrolyte Disorders	30	20	13 - 47	17	24	9 - 52
Pulmonary Disease	96	28	15 - 36	89	24	16 - 37
Renal Failure	5	60	15 - 89	2	100	11 - 98
Severe Acute Heart Disease	71	38	29 - 53	54	43	28 - 55
Severe Chronic Heart Disease	124	29	15 - 33	121	19	15 - 31
Severe Trauma	4	0	4 - 71	3	33	3 - 86
Gastrointestinal Disease	130	2	1 - 9	113	4	1 - 11
Gynecologic Disease	17	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	288	4	2 - 7	284	2	2 - 6
Musculoskeletal/Skin Conditions	148	1	1 - 7	166	1	1 - 5
Neuropsychiatric/Sensory Disease	30	3	0 - 32	43	2	0 - 30
Urologic Disease	62	0	0 - 22	94	1	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	275
Occupancy Rate (%):	66
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	230
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	0
Registered Nurses:	286
Licensed Practical Nurses:	29

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

GRAHAM HOSPITAL ASSOCIATION

210 WEST WALNUT STREET
CANTON, IL 61520

Medicare Hospital Provider Number: 140001

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	977	13	11 - 16	1,171	12	9 - 14
Cancer	28	46	24 - 62	31	45	25 - 61
Cerebrovascular Accidents	39	26	15 - 43	37	46	17 - 50
Gastrointestinal Catastrophes	6	83	15 - 76	6	17	8 - 71
Infectious Disease	21	14	18 - 53	16	19	15 - 56
Metabolic/Electrolyte Disorders	19	26	6 - 50	11	18	2 - 58
Pulmonary Disease	55	24	16 - 40	48	17	16 - 40
Renal Failure	4	25	7 - 84	0	-	-
Severe Acute Heart Disease	52	38	27 - 55	33	48	24 - 58
Severe Chronic Heart Disease	67	31	14 - 37	74	28	14 - 36
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	66	3	1 - 14	119	3	1 - 9
Gynecologic Disease	15	0	0 -100	20	0	0 -100
Low-Risk Heart Disease	122	3	2 - 10	158	3	1 - 8
Musculoskeletal/Skin Conditions	67	3	1 - 15	117	0	1 - 5
Neuropsychiatric/Sensory Disease	20	0	0 - 47	31	6	0 - 71
Urologic Disease	68	1	0 - 16	52	0	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	122
Occupancy Rate (%):	52
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	29
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	0
Registered Nurses:	77
Licensed Practical Nurses:	36

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Graham Hospital
210 w. walnut st. / canton, IL 61520
telephone 309/647-5240

September 22, 1988

Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

Re: Graham Hospital
ID #140001

Dear Ms. Kappert:

After reviewing the Medicare Hospital Mortality Information we received, we would like to note a correction. Graham Hospital does run a mixed Intensive Care/Coronary Care Unit.

Sincerely,

D. Ray Slaubaugh

D. Ray Slaubaugh
Senior Vice President

DRS/vp

GRANT HOSPITAL

550 W WEBSTER AVE
CHICAGO , IL 60614

Medicare Hospital Provider Number: 140207

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,844	13	11 - 16	2,061	12	12 - 16
Cancer	54	41	29 - 57	58	40	33 - 61
Cerebrovascular Accidents	65	17	19 - 39	77	26	20 - 41
Gastrointestinal Catastrophes	16	44	18 - 66	20	15	20 - 57
Infectious Disease	26	38	20 - 59	32	25	27 - 60
Metabolic/Electrolyte Disorders	60	25	16 - 44	46	30	14 - 46
Pulmonary Disease	99	27	23 - 44	89	36	25 - 48
Renal Failure	7	43	13 - 81	14	57	13 - 73
Severe Acute Heart Disease	50	44	30 - 59	79	35	30 - 53
Severe Chronic Heart Disease	65	23	14 - 35	103	21	16 - 34
Severe Trauma	2	0	1 - 91	2	50	2 - 92
Gastrointestinal Disease	113	5	2 - 12	160	1	2 - 7
Gynecologic Disease	14	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	241	1	2 - 6	249	3	2 - 7
Musculoskeletal/Skin Conditions	129	3	1 - 10	162	3	1 - 8
Neuropsychiatric/Sensory Disease	72	0	1 - 9	125	1	0 - 7
Urologic Disease	81	2	1 - 12	78	3	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	413
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	290
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	38
Registered Nurses:	392
Licensed Practical Nurses:	46

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

HAMILTON MEMORIAL HOSPITAL

611 S MARSHALL
MCLEANSBORO, IL 62859

Medicare Hospital Provider Number: 140171

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	392	9	10 - 17	370	9	10 - 17
Cancer	6	67	19 - 84	7	43	21 - 84
Cerebrovascular Accidents	15	20	11 - 53	13	31	10 - 59
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	1	0	1 - 97	2	0	6 - 90
Metabolic/Electrolyte Disorders	3	33	8 - 89	10	20	12 - 64
Pulmonary Disease	15	13	14 - 53	13	15	8 - 51
Renal Failure	4	50	15 - 94	3	33	8 - 91
Severe Acute Heart Disease	15	20	25 - 66	15	60	22 - 69
Severe Chronic Heart Disease	24	25	10 - 45	11	18	7 - 55
Severe Trauma	1	0	1 - 97	0	-	-
Gastrointestinal Disease	33	6	1 - 30	35	3	0 - 34
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	60	3	1 - 16	59	2	1 - 12
Musculoskeletal/Skin Conditions	38	0	1 - 14	30	0	1 - 19
Neuropsychiatric/Sensory Disease	3	0	0 -100	5	0	0 -100
Urologic Disease	20	0	1 - 28	19	0	0 - 42

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	104
Occupancy Rate (%):	79
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	5
Percent of Physicians Who Are Board Certified Specialists:	40
Interns and Residents:	0
Registered Nurses:	19
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HAMMOND HENRY DISTRICT HOSPITAL

210 WEST ELK
GENESEO, IL 61254

Medicare Hospital Provider Number: 140041

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	344	13	8 - 16	406	13	9 - 17
Cancer	5	60	5 - 77	11	36	15 - 69
Cerebrovascular Accidents	16	38	9 - 55	16	31	10 - 55
Gastrointestinal Catastrophes	1	0	0 - 98	2	50	1 - 92
Infectious Disease	4	0	3 - 71	3	33	4 - 86
Metabolic/Electrolyte Disorders	0	-	-	3	0	0 - 93
Pulmonary Disease	21	29	7 - 48	22	27	9 - 48
Renal Failure	1	100	3 - 98	3	33	6 - 89
Severe Acute Heart Disease	30	43	23 - 58	27	44	24 - 61
Severe Chronic Heart Disease	17	12	8 - 43	29	24	11 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	27	4	0 - 58	39	3	0 - 23
Gynecologic Disease	1	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	47	6	0 - 26	47	0	1 - 11
Musculoskeletal/Skin Conditions	26	0	0 - 29	33	0	0 - 32
Neuropsychiatric/Sensory Disease	4	0	0 -100	7	0	0 -100
Urologic Disease	15	0	0 -100	22	5	0 - 86

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	105
Occupancy Rate (%):	62
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	6
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	0
Registered Nurses:	36
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HARDIN CO GEN HOSP

FERRELL ROAD
ROSICLARE, IL 62982

Medicare Hospital Provider Number: 140005

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	320	12	7 - 15	323	11	5 - 13
Cancer	7	57	15 - 79	4	75	14 - 87
Cerebrovascular Accidents	9	22	6 - 61	4	25	4 - 79
Gastrointestinal Catastrophes	0	-	-	1	100	1 - 97
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	2	0	5 - 89	3	33	3 - 86
Pulmonary Disease	27	33	16 - 52	22	18	10 - 45
Renal Failure	1	100	2 -100	0	-	-
Severe Acute Heart Disease	7	57	13 - 76	9	44	8 - 67
Severe Chronic Heart Disease	11	36	4 - 60	9	44	6 - 66
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	37	0	0 - 19	46	7	0 - 29
Gynecologic Disease	4	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	41	5	0 - 30	67	3	1 - 14
Musculoskeletal/Skin Conditions	37	3	0 - 27	37	3	0 - 36
Neuropsychiatric/Sensory Disease	3	0	0 -100	10	10	0 -100
Urologic Disease	15	0	0 - 61	15	0	0 - 97

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	48
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	4
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	13
Licensed Practical Nurses:	22

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HARRISBURG MEDICAL CENTER

17 COUNTRY CLUB COURT
HARRISBURG, IL 62946

Medicare Hospital Provider Number: 140210

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	682	13	10 - 16	735	14	9 - 15
Cancer	23	70	28 - 66	25	64	23 - 61
Cerebrovascular Accidents	28	18	15 - 45	39	36	16 - 47
Gastrointestinal Catastrophes	4	50	4 - 82	4	50	6 - 83
Infectious Disease	13	31	12 - 62	5	40	6 - 78
Metabolic/Electrolyte Disorders	12	25	5 - 58	10	0	5 - 44
Pulmonary Disease	31	32	13 - 47	41	10	14 - 36
Renal Failure	10	30	15 - 76	5	60	7 - 82
Severe Acute Heart Disease	28	46	24 - 61	35	54	23 - 56
Severe Chronic Heart Disease	38	26	12 - 41	37	35	11 - 42
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	60	3	0 - 26	83	0	1 - 7
Gynecologic Disease	6	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	73	4	1 - 14	79	11	1 - 21
Musculoskeletal/Skin Conditions	56	0	0 - 14	51	0	0 - 15
Neuropsychiatric/Sensory Disease	22	0	0 - 63	14	0	0 - 91
Urologic Disease	25	0	0 - 43	42	0	0 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	85
Occupancy Rate (%):	47
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HARVARD COMMUNITY MEM HOSPITAL

901 GRANT ST
HARVARD, IL 60033

Medicare Hospital Provider Number: 140144

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	215	20	9 - 20	211	14	10 - 21
Cancer	7	71	18 - 79	7	29	18 - 79
Cerebrovascular Accidents	13	38	11 - 61	8	38	9 - 69
Gastrointestinal Catastrophes	3	0	7 - 80	2	50	1 - 93
Infectious Disease	5	0	6 - 64	4	25	5 - 80
Metabolic/Electrolyte Disorders	2	0	1 - 89	4	50	8 - 84
Pulmonary Disease	19	32	11 - 53	15	20	20 - 61
Renal Failure	2	100	4 - 89	1	100	0 - 99
Severe Acute Heart Disease	4	75	9 - 82	11	64	16 - 69
Severe Chronic Heart Disease	19	37	6 - 50	12	33	7 - 59
Severe Trauma	0	-	-	1	0	0 - 99
Gastrointestinal Disease	20	0	0 - 39	19	5	0 - 77
Gynecologic Disease	1	0	0 -100	0	-	-
Low-Risk Heart Disease	25	8	0 - 71	25	8	0 - 59
Musculoskeletal/Skin Conditions	15	7	0 - 98	19	0	0 - 87
Neuropsychiatric/Sensory Disease	5	0	0 -100	5	0	0 -100
Urologic Disease	9	0	0 - 82	12	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	46
Occupancy Rate (%):	(not available)
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

HERRIN HOSP

201 S 14TH ST
HERRIN, IL 62948

Medicare Hospital Provider Number: 140011

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,085	15	11 - 17	1,118	14	11 - 16
Cancer	47	62	38 - 68	44	52	30 - 62
Cerebrovascular Accidents	42	21	16 - 42	47	38	16 - 44
Gastrointestinal Catastrophes	5	40	11 - 82	4	25	7 - 81
Infectious Disease	6	67	10 - 76	11	18	15 - 63
Metabolic/Electrolyte Disorders	10	10	4 - 54	17	24	4 - 50
Pulmonary Disease	71	31	17 - 41	70	33	17 - 41
Renal Failure	11	73	19 - 79	8	63	15 - 82
Severe Acute Heart Disease	50	58	28 - 56	46	52	26 - 56
Severe Chronic Heart Disease	66	20	14 - 34	65	25	14 - 37
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	76	3	1 - 13	75	4	0 - 16
Gynecologic Disease	16	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	135	1	2 - 6	185	1	2 - 6
Musculoskeletal/Skin Conditions	109	6	0 - 16	88	0	1 - 7
Neuropsychiatric/Sensory Disease	17	6	0 - 94	26	4	0 - 82
Urologic Disease	38	5	0 - 43	33	6	0 - 61

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	98
Occupancy Rate (%):	74
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	27
Percent of Physicians Who Are Board Certified Specialists:	48
Interns and Residents:	0
Registered Nurses:	68
Licensed Practical Nurses:	38

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HIGHLAND HOSPITAL INC

1625 SO STATE
BELVIDERE, IL 61008

Medicare Hospital Provider Number: 140205

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	172	15	8 - 19	256	14	8 - 18
Cancer	1	0	1 - 97	6	50	8 - 76
Cerebrovascular Accidents	7	14	8 - 65	12	33	14 - 64
Gastrointestinal Catastrophes	1	100	3 - 98	0	-	-
Infectious Disease	4	25	6 - 80	4	0	13 - 76
Metabolic/Electrolyte Disorders	4	25	2 - 81	8	50	6 - 69
Pulmonary Disease	17	24	10 - 52	24	29	8 - 46
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	4	50	13 - 88	8	25	15 - 72
Severe Chronic Heart Disease	9	33	6 - 64	15	33	8 - 55
Severe Trauma	1	0	0 -100	1	0	0 - 98
Gastrointestinal Disease	19	0	0 - 53	22	0	0 - 46
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	19	5	0 - 44	26	8	0 - 57
Musculoskeletal/Skin Conditions	11	0	0 - 80	25	0	0 - 29
Neuropsychiatric/Sensory Disease	5	0	0 -100	5	0	0 -100
Urologic Disease	14	0	0 - 98	17	0	0 - 97

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	69
Occupancy Rate (%):	26
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	18
Percent of Physicians Who Are Board Certified Specialists:	33
Interns and Residents:	0
Registered Nurses:	25
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HIGHLAND PARK HOSPITAL

718 GLENVIEW AVE
HIGHLAND PARK, IL 60035

Medicare Hospital Provider Number: 140108

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,595	13	11 - 15	1,578	12	11 - 15
Cancer	42	45	25 - 57	67	49	34 - 61
Cerebrovascular Accidents	62	18	17 - 38	72	38	18 - 42
Gastrointestinal Catastrophes	16	38	13 - 61	12	42	11 - 65
Infectious Disease	22	27	19 - 58	14	36	15 - 64
Metabolic/Electrolyte Disorders	34	29	15 - 49	35	37	12 - 48
Pulmonary Disease	103	37	19 - 40	76	25	19 - 41
Renal Failure	9	33	10 - 74	6	33	9 - 80
Severe Acute Heart Disease	76	41	30 - 53	66	32	32 - 56
Severe Chronic Heart Disease	51	22	13 - 37	64	13	14 - 32
Severe Trauma	4	75	6 - 81	4	25	10 - 84
Gastrointestinal Disease	123	3	1 - 10	109	3	1 - 10
Gynecologic Disease	14	0	0 -100	15	7	0 -100
Low-Risk Heart Disease	145	4	2 - 10	139	1	2 - 7
Musculoskeletal/Skin Conditions	192	1	2 - 5	205	1	1 - 6
Neuropsychiatric/Sensory Disease	68	0	0 - 9	67	4	0 - 25
Urologic Disease	97	1	0 - 13	83	1	0 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	281
Occupancy Rate (%):	61
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	185
Percent of Physicians Who Are Board Certified Specialists:	92
Interns and Residents:	0
Registered Nurses:	317
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

HIGHLAND PARK HOSPITAL
718 Glenview Avenue
Highland Park, Illinois 60035
(312) 432-8000

October 19, 1988

William I. Roper, M.D.
Administrator
Health Care Financing Administration
Department Health and Human Services
Room 309-G, Hubert H. Humphrey Building
200 Independence Ave., SW
Washington, D.C.

Dear Dr. Roper:

Thank you for the opportunity to comment on mortality statistics developed by the Health Care Financing Administration (HCFA) for Highland Park Hospital (Healthcare Provider #140108). We have reviewed the information and have the following comments.

The reliability of a statistical model is very limited, given that several factors which impact mortality are difficult to predict. Examples are stage of illness, psychological condition and the patients' general health status. Thus, the mortality rate is more appropriately termed an "adjusted average mortality rate" rather than a "predicted rate".

Most importantly, the adjusted mortality rate cannot be used to indicate the quality of care in any hospital, because significant factors which influence the mortality are excluded from the calculations. Therefore the mortality rates should not be a basis for comparing quality between institutions. The public should be cautioned against making these comparisons by HCFA because hospitals treat different levels of acutely ill patients.

The data for Highland Park Hospital indicates that the actual mortality rates for the 16 diagnostic categories are in all instances within the predicted range of mortality.

Our review of all the data has provided supplemental information which the public should find useful in interpreting the HCFA data for Highland Park Hospital.

1. One-third (35%) of all Medicare patients admitted to Highland Park Hospital are not in the HCFA data.

2. There were five discrepencies in the data - all had incorrectly stated date of death.

3. The hospital characteristics section has several errors. Highland Park Hospital has trauma and emergency services, a coronary care unit and a hospice care unit. These services were not listed accurately. Licensed beds are 326. There are approximately 375 physicians on staff.

4. A majority (67%) of the admissions included in the sample were 75 and older, with 35% being 85 and older.

5. Twenty-six percent, or 55 of the 215 deaths occurred after discharge from Highland Park Hospital. Of these 55 individuals, 36 deaths occurred either at home or a freestanding nursing home.

6. Twenty of the deaths occurred while under hospice care, which overstates the mortality rate. For example, adjusting the cancer category accordingly results in Highland Park Hospital falling to the lowest predicted mortality in treatment of cancer patients.

7. Twenty-six percent of the deaths, or 51 people had underlying cancer upon admission to the hospital. This indicates that Highland Park Hospital treats more acutely ill patients in our oncology unit.

8. Sixty-nine percent of the deaths, or 149 people were admitted to the hospital through the Emergency Room.

9. Thirty-seven percent, or 80 people were admitted from a nursing home.

10. Sixty-one percent of the patients who died were placed in ICU or CCU or MINCA upon admission.

11. Sixty-seven percent of the deceased patients had a Do Not Resuscitate order or a Living Will.

Highland Park Hospital and our medical staff have a well-established and ongoing quality assurance program which focuses on monitoring and improving care. Highland Park Hospital agrees with the goal of informing the public about quality of care, but would request that a more accurate methodology be used so as not to confuse the public about this extremely important issue.

Highland Park Hospital appreciates the opportunity to provide these comments.

Sincerely,

Ronald G. Spaeth
President
Chief Executive Officer

RGS:wnk

cc: Janet Hunter
Myndee Gomberg Balkan
Judy Van Derhaeghen

HILLSBORO HOSP

1200 TREMONT ST
HILLSBORO, IL 62049

Medicare Hospital Provider Number: 140193

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	550	15	10 - 17	497	11	10 - 17
Cancer	17	53	20 - 66	13	38	18 - 68
Cerebrovascular Accidents	25	20	14 - 47	25	20	15 - 48
Gastrointestinal Catastrophes	3	33	6 - 88	2	50	6 - 95
Infectious Disease	7	43	10 - 74	6	50	4 - 75
Metabolic/Electrolyte Disorders	16	13	8 - 48	6	33	1 - 77
Pulmonary Disease	61	34	16 - 42	44	34	15 - 45
Renal Failure	3	100	15 - 90	1	0	3 - 98
Severe Acute Heart Disease	19	42	22 - 64	23	39	26 - 65
Severe Chronic Heart Disease	26	31	10 - 46	32	25	9 - 40
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	55	2	1 - 14	70	1	2 - 11
Gynecologic Disease	5	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	58	2	1 - 13	56	2	1 - 13
Musculoskeletal/Skin Conditions	45	7	0 - 34	41	0	1 - 12
Neuropsychiatric/Sensory Disease	10	10	0 -100	11	0	0 -100
Urologic Disease	16	6	0 - 84	12	17	0 - 80

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	100
Occupancy Rate (%):	52
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	29
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HINSDALE SANITARIUM HOSP

120 NORTH OAK ST
HINSDALE, IL 60521

Medicare Hospital Provider Number: 140122

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,437	12	10 - 15	2,413	12	11 - 15
Cancer	105	39	30 - 53	107	31	28 - 51
Cerebrovascular Accidents	80	27	18 - 39	102	22	18 - 36
Gastrointestinal Catastrophes	30	43	18 - 56	24	38	19 - 60
Infectious Disease	28	25	19 - 54	36	42	24 - 59
Metabolic/Electrolyte Disorders	44	36	14 - 47	40	25	15 - 47
Pulmonary Disease	139	27	20 - 38	125	33	17 - 37
Renal Failure	6	33	13 - 83	6	33	11 - 82
Severe Acute Heart Disease	76	46	29 - 53	88	35	29 - 51
Severe Chronic Heart Disease	109	21	16 - 33	111	23	15 - 33
Severe Trauma	9	56	9 - 69	5	0	8 - 66
Gastrointestinal Disease	202	2	2 - 7	166	0	1 - 5
Gynecologic Disease	20	0	0 -100	31	0	0 -100
Low-Risk Heart Disease	281	4	2 - 7	291	3	2 - 6
Musculoskeletal/Skin Conditions	316	1	1 - 5	274	2	1 - 6
Neuropsychiatric/Sensory Disease	105	1	1 - 8	88	1	0 - 10
Urologic Disease	82	2	0 - 16	64	2	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	437
Occupancy Rate (%):	73
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	335
Percent of Physicians Who Are Board Certified Specialists:	80
Interns and Residents:	29
Registered Nurses:	571
Licensed Practical Nurses:	38

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

HOLY CROSS HOSPITAL

2701 W 68TH STREET
CHICAGO, IL 60629

Medicare Hospital Provider Number: 140133

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,318	14	10 - 14	3,394	14	10 - 14
Cancer	95	44	30 - 54	94	53	30 - 54
Cerebrovascular Accidents	187	31	19 - 34	162	28	18 - 34
Gastrointestinal Catastrophes	24	63	16 - 57	38	26	19 - 52
Infectious Disease	29	31	17 - 53	37	32	20 - 54
Metabolic/Electrolyte Disorders	69	41	17 - 46	68	31	15 - 43
Pulmonary Disease	154	29	18 - 36	186	33	16 - 34
Renal Failure	12	33	16 - 75	6	33	11 - 81
Severe Acute Heart Disease	153	42	30 - 49	123	42	28 - 48
Severe Chronic Heart Disease	214	26	16 - 30	212	21	16 - 29
Severe Trauma	9	56	6 - 67	6	33	2 - 75
Gastrointestinal Disease	264	4	1 - 7	280	4	1 - 7
Gynecologic Disease	39	0	0 -100	24	0	0 -100
Low-Risk Heart Disease	474	2	2 - 5	457	4	2 - 6
Musculoskeletal/Skin Conditions	311	2	1 - 5	338	2	1 - 6
Neuropsychiatric/Sensory Disease	56	5	0 - 30	72	3	0 - 18
Urologic Disease	148	3	0 - 12	154	4	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	370
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	156
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	200
Licensed Practical Nurses:	106

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

HOLY FAMILY HOSP

100 N RIVER RD
DES PLAINES, IL 60016

Medicare Hospital Provider Number: 140105

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,859	12	10 - 15	1,936	13	10 - 15
Cancer	50	46	26 - 56	50	34	25 - 55
Cerebrovascular Accidents	114	20	19 - 36	91	22	17 - 36
Gastrointestinal Catastrophes	17	35	19 - 65	13	46	16 - 68
Infectious Disease	33	42	20 - 56	30	60	22 - 59
Metabolic/Electrolyte Disorders	28	29	10 - 48	29	34	10 - 48
Pulmonary Disease	90	27	19 - 40	101	33	17 - 38
Renal Failure	12	58	18 - 79	7	43	14 - 83
Severe Acute Heart Disease	90	31	28 - 50	109	37	30 - 51
Severe Chronic Heart Disease	100	25	15 - 33	112	21	15 - 31
Severe Trauma	4	0	4 - 71	5	80	3 - 75
Gastrointestinal Disease	185	5	1 - 10	165	4	1 - 9
Gynecologic Disease	14	0	0 -100	24	0	0 -100
Low-Risk Heart Disease	243	0	2 - 5	227	2	2 - 6
Musculoskeletal/Skin Conditions	175	3	1 - 8	205	2	1 - 7
Neuropsychiatric/Sensory Disease	38	3	0 - 46	24	4	0 -100
Urologic Disease	76	7	0 - 53	84	4	0 - 22

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	246
Occupancy Rate (%):	51
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	278
Percent of Physicians Who Are Board Certified Specialists:	82
Interns and Residents:	0
Registered Nurses:	213
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

Holy Family Hospital

100 North River Road
Des Plaines, Illinois 60016
(312) 297-1800

October 18, 1988

William L. Roper, M.D.
Health Care Financing Administration
Health Standards and Quality Bureau
Meadow East Building 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

On behalf of the Governing Board, the Administration, and the Medical Staff of Holy Family Hospital, Inc. I wish to thank you for the opportunity to provide a response to the mortality data for calendar year 1987, which were compiled by the Department of Health and Human Services (DHHS). We support your efforts to educate those interested in quality issues related to Medicare and we appreciate your efforts to develop appropriate measurement tools.

The statistics indicate that the mortality rates experienced by Holy Family Hospital are well within the predicted range in each of the diagnostic categories. This information is useful in our hospital's ongoing Quality Assurance Program which includes regular and complete review of all mortality cases. This same process is utilized to review the quality of care provided to all patients which, in addition to Quality Assurance, is reported to Utilization Review, the regular Medical/Dental Staff Department meetings, the Governing Board, and indirectly to outside review organizations such as The Joint Commission on Accreditation of Healthcare Organizations.

While the statistical data from the DHHS is useful for professional evaluation, it may not be as beneficial for consumer use. As a result, consumers should be informed as to the limited scope of these numbers, and be cautioned about drawing any conclusions from the data about the quality of a particular hospital's service.

Holy Family Hospital is a 246 bed general acute care facility that offers a full range of services to a large metropolitan area. Our mission is to promote wholeness of mind, body and spirit while providing high quality medical treatment and patient care.

Our commitment to excellence in health services is consistent with the goals of the DHHS. Through a multidisciplinary Quality Assurance Program, we will continue to monitor the appropriateness and quality of care provided to our consumers.

Again, we thank you for the opportunity to present this response to the data release. If you or anyone receiving this information has additional questions or comments, please do not hesitate to call.

Sincerely,

Thomas E. Laubach
Executive Director/COO

JAP:kkg
2785N

HOOPESTON COMMUNITY MEMORIAL HOSP

701 EAST ORANGE ST
HOOPESTON, IL 60942

Medicare Hospital Provider Number: 140097

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	130	21	7 - 22	142	11	8 - 19
Cancer	3	100	12 - 85	2	0	4 - 88
Cerebrovascular Accidents	1	0	0 - 98	8	38	13 - 73
Gastrointestinal Catastrophes	1	0	0 - 98	2	0	5 - 89
Infectious Disease	1	100	0 - 98	1	100	3 - 99
Metabolic/Electrolyte Disorders	1	100	3 - 98	3	33	0 - 93
Pulmonary Disease	19	42	10 - 54	14	7	10 - 45
Renal Failure	1	100	2 -100	0	-	-
Severe Acute Heart Disease	4	50	6 - 83	5	60	8 - 79
Severe Chronic Heart Disease	11	27	5 - 58	3	33	1 - 89
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	24	0	0 - 68	22	0	0 - 31
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	10	20	0 -100	7	14	0 - 89
Musculoskeletal/Skin Conditions	8	13	0 - 95	19	11	0 - 85
Neuropsychiatric/Sensory Disease	1	0	0 -100	2	0	0 -100
Urologic Disease	9	0	0 - 95	10	20	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	94
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

HOPEDALE HOSPITAL

SECOND AND TREMONT STREET
HOPEDALE, IL 61747

Medicare Hospital Provider Number: 140121

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	171	16	10 - 22	162	12	10 - 20
Cancer	10	20	22 - 72	6	67	17 - 82
Cerebrovascular Accidents	6	33	4 - 73	7	14	5 - 63
Gastrointestinal Catastrophes	2	50	2 - 92	2	0	0 - 93
Infectious Disease	1	0	0 - 99	3	0	10 - 83
Metabolic/Electrolyte Disorders	2	50	3 - 92	1	0	1 - 97
Pulmonary Disease	13	15	11 - 54	19	32	13 - 55
Renal Failure	1	100	1 - 97	3	33	9 - 92
Severe Acute Heart Disease	8	63	16 - 76	4	50	9 - 85
Severe Chronic Heart Disease	13	23	8 - 55	5	20	3 - 74
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	18	0	0 - 40	16	0	0 - 63
Gynecologic Disease	4	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	14	0	2 - 32	19	0	0 - 35
Musculoskeletal/Skin Conditions	9	0	0 -100	20	0	0 - 82
Neuropsychiatric/Sensory Disease	15	0	0 - 87	6	0	0 - 89
Urologic Disease	5	0	0 - 94	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	62
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

HUMANA HOSPITAL HOFFMAN ESTATES

1555 N BARRINGTON RD
HOFFMAN ESTATES, IL 60194

Medicare Hospital Provider Number: 140290

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	950	13	10 - 16	912	14	10 - 16
Cancer	13	46	14 - 65	11	64	15 - 68
Cerebrovascular Accidents	48	29	15 - 42	39	38	12 - 44
Gastrointestinal Catastrophes	8	13	15 - 68	7	29	14 - 76
Infectious Disease	12	33	12 - 64	24	33	19 - 59
Metabolic/Electrolyte Disorders	32	38	14 - 51	25	36	6 - 48
Pulmonary Disease	66	23	18 - 40	58	28	17 - 42
Renal Failure	4	50	7 - 86	3	67	8 - 90
Severe Acute Heart Disease	41	46	27 - 58	35	57	27 - 60
Severe Chronic Heart Disease	43	12	16 - 38	75	27	15 - 37
Severe Trauma	3	0	2 - 81	2	50	1 - 93
Gastrointestinal Disease	61	2	1 - 12	58	3	1 - 17
Gynecologic Disease	3	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	130	4	1 - 10	104	1	1 - 7
Musculoskeletal/Skin Conditions	102	0	0 - 6	96	1	0 - 9
Neuropsychiatric/Sensory Disease	26	12	0 - 75	28	4	0 - 50
Urologic Disease	36	0	0 - 18	41	2	0 - 46

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	229
Occupancy Rate (%):	62
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	292
Percent of Physicians Who Are Board Certified Specialists:	57
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HUMANA HOSPITAL OF SPRINGFIELD

5230 SOUTH 6TH FRONTAGE ROAD
SPRINGFIELD, IL 62703

Medicare Hospital Provider Number: 140285

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	406	9	10 - 16	539	11	9 - 16
Cancer	10	40	18 - 74	9	22	18 - 71
Cerebrovascular Accidents	16	6	13 - 45	24	17	16 - 48
Gastrointestinal Catastrophes	2	0	10 - 93	2	50	2 - 92
Infectious Disease	4	0	8 - 72	5	80	13 - 80
Metabolic/Electrolyte Disorders	17	18	8 - 49	22	18	12 - 49
Pulmonary Disease	34	21	18 - 47	34	26	13 - 44
Renal Failure	0	-	-	1	100	3 - 98
Severe Acute Heart Disease	9	22	14 - 67	13	38	19 - 69
Severe Chronic Heart Disease	34	18	11 - 38	32	28	10 - 42
Severe Trauma	0	-	-	1	0	0 - 98
Gastrointestinal Disease	33	3	1 - 24	64	0	1 - 9
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	40	0	2 - 13	44	5	0 - 24
Musculoskeletal/Skin Conditions	31	6	0 - 42	55	2	1 - 13
Neuropsychiatric/Sensory Disease	11	0	0 - 99	15	0	0 - 92
Urologic Disease	19	0	0 - 96	27	0	0 - 35

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	100
Occupancy Rate (%):	34
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	195
Percent of Physicians Who Are Board Certified Specialists:	45
Interns and Residents:	0
Registered Nurses:	55
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HYDE PARK COMMUNITY HOSPITAL

5800 STONY ISLAND AVE
CHICAGO, IL 60637

Medicare Hospital Provider Number: 140253

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	705	12	11 - 17	856	12	12 - 18
Cancer	20	40	25 - 67	25	44	29 - 69
Cerebrovascular Accidents	34	15	19 - 44	50	14	20 - 41
Gastrointestinal Catastrophes	5	60	10 - 81	9	56	8 - 68
Infectious Disease	10	40	17 - 73	21	57	26 - 69
Metabolic/Electrolyte Disorders	22	32	12 - 54	13	46	14 - 66
Pulmonary Disease	27	41	16 - 54	44	23	14 - 41
Renal Failure	5	0	14 - 77	9	11	13 - 71
Severe Acute Heart Disease	20	20	22 - 59	20	50	27 - 69
Severe Chronic Heart Disease	39	18	16 - 41	40	20	15 - 42
Severe Trauma	1	0	0 - 97	0	-	-
Gastrointestinal Disease	34	12	0 - 38	38	0	0 - 16
Gynecologic Disease	7	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	85	5	1 - 14	117	5	1 - 12
Musculoskeletal/Skin Conditions	42	5	0 - 25	60	2	1 - 12
Neuropsychiatric/Sensory Disease	22	9	0 - 55	30	0	0 - 39
Urologic Disease	20	5	0 - 50	24	4	1 - 33

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	234
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

ILLINI COMMUNITY HOSPITAL

640 WEST WASINGTON ST
PITTSFIELD, IL 62363

Medicare Hospital Provider Number: 140139

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	489	16	12 - 20	509	15	11 - 18
Cancer	10	70	18 - 72	8	50	22 - 83
Cerebrovascular Accidents	17	41	11 - 56	18	33	13 - 56
Gastrointestinal Catastrophes	7	14	10 - 68	3	67	7 - 88
Infectious Disease	6	17	16 - 77	9	22	16 - 71
Metabolic/Electrolyte Disorders	20	10	14 - 48	19	26	8 - 51
Pulmonary Disease	43	37	15 - 45	41	27	13 - 42
Renal Failure	3	100	12 - 87	7	57	16 - 85
Severe Acute Heart Disease	26	50	30 - 67	13	46	26 - 76
Severe Chronic Heart Disease	31	32	12 - 45	30	30	12 - 45
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	47	2	1 - 15	39	0	1 - 14
Gynecologic Disease	3	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	61	2	1 - 12	71	3	1 - 13
Musculoskeletal/Skin Conditions	26	0	1 - 22	34	0	1 - 15
Neuropsychiatric/Sensory Disease	8	13	0 -100	17	6	0 - 93
Urologic Disease	9	11	0 -100	9	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	59
Occupancy Rate (%):	34
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	8
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	29
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ILLINI HOSPITAL DISTRICT

801 13TH AVENUE
SILVIS, IL 61282

Medicare Hospital Provider Number: 140275

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	938	8	7 - 12	1,011	14	9 - 15
Cancer	11	45	14 - 68	29	52	27 - 64
Cerebrovascular Accidents	24	8	12 - 39	33	42	12 - 46
Gastrointestinal Catastrophes	10	20	18 - 69	10	40	15 - 71
Infectious Disease	5	20	8 - 75	10	30	11 - 66
Metabolic/Electrolyte Disorders	14	7	10 - 48	24	25	7 - 46
Pulmonary Disease	49	24	14 - 40	57	30	14 - 40
Renal Failure	2	0	4 - 89	7	71	15 - 83
Severe Acute Heart Disease	35	34	20 - 53	31	52	23 - 58
Severe Chronic Heart Disease	64	9	13 - 29	67	30	12 - 35
Severe Trauma	1	0	2 - 97	1	0	1 - 97
Gastrointestinal Disease	104	1	1 - 8	93	2	1 - 10
Gynecologic Disease	10	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	129	1	1 - 6	147	5	1 - 10
Musculoskeletal/Skin Conditions	95	2	0 - 11	103	5	1 - 14
Neuropsychiatric/Sensory Disease	25	4	0 - 81	23	4	0 - 83
Urologic Disease	42	0	0 - 27	25	12	0 - 95

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	133
Occupancy Rate (%):	46
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	58
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	0
Registered Nurses:	121
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

illini HOSPITAL

October 21, 1988 Medicare Provider #140275

ATTN: Mrs. Sandra Cappert

FROM: Michael J. Staab
Director of Quality Assurance, Illini Hospital

Health Care Financing Administration
6325 Security Boulevard
Baltimore, MD 21207

Please include the following in your December publication of Medicare data.

"As you have relayed to us, your Medicare hospital mortality information is an ongoing process. We hope that you will continue to refine your methods and data as a part of this process. Although our hospital's data was well within the predicted range, we would still like to inform you of the potential for distributing misleading information to the public. For example, a patient may be discharged from a hospital and later die from a completely unrelated cause. The information you distributed to us revealed that a patient with multiple medical problems came to our hospital, was discharged, and died sixteen days later. What you may not realize is, after further investigation, we found that the patient died from taking his own life.

Another example was the patient who was admitted for a fractured leg, was discharged from our hospital, and died 23 days later from a heart attack at a nursing home. Clearly, both of these cases were not related to the hospital stay, yet these case have been used to calculate our hospital's mortality rate.

We do not believe your data measures quality. Mortality data can only guide or focus peer review activities, but they do not indicate a hospital's performance in any way. Your model merely measures a relationship between mortality and a selected group of patient's characteristics (for example: age, sex, prior hospitalizations, and transfer status), and does not reflect the patient's severity of illness, or such key factors such as local demographics and health status."

ILLINOIS MASONIC MED CTR

836 W WELLINGTON
CHICAGO, IL 60657

Medicare Hospital Provider Number: 140132

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,841	11	9 - 14	1,797	11	9 - 14
Cancer	56	48	27 - 56	54	39	28 - 57
Cerebrovascular Accidents	67	13	18 - 36	63	24	19 - 41
Gastrointestinal Catastrophes	9	22	13 - 68	15	33	14 - 62
Infectious Disease	16	19	15 - 57	12	50	19 - 72
Metabolic/Electrolyte Disorders	34	38	12 - 48	34	21	12 - 45
Pulmonary Disease	106	19	18 - 36	94	24	17 - 38
Renal Failure	3	67	7 - 90	6	67	13 - 84
Severe Acute Heart Disease	45	38	26 - 55	52	35	27 - 54
Severe Chronic Heart Disease	99	22	16 - 34	85	15	17 - 34
Severe Trauma	5	60	2 - 79	8	38	6 - 70
Gastrointestinal Disease	112	3	1 - 10	116	2	1 - 8
Gynecologic Disease	11	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	284	6	2 - 8	265	3	2 - 7
Musculoskeletal/Skin Conditions	154	1	1 - 7	183	3	1 - 8
Neuropsychiatric/Sensory Disease	158	3	1 - 9	129	0	1 - 6
Urologic Disease	52	6	0 - 59	50	4	0 - 39

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	730
Occupancy Rate (%):	85
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	451
Percent of Physicians Who Are Board Certified Specialists:	61
Interns and Residents:	133
Registered Nurses:	332
Licensed Practical Nurses:	32

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

illinois masonic medical center
836 WELLINGTON AVENUE / CHICAGO, ILLINOIS 60657-5193 / (312) 975-1600

AFFILIATED WITH THE UNIVERSITY OF ILLINOIS
COLLEGE OF MEDICINE (PRINCIPAL AFFILIATE)
AND COLLEGES OF DENTISTRY, NURSING
AND ASSOCIATED HEALTH PROFESSIONS

October 19, 1988

Mrs. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Please be advised the Hospital Characteristics for Illinois Masonic Medical Center may not reflect the correct information. The data given to IMMC to review was not accurate per the 1986 AHA Survey; so we expect that the updated 1987 data may also be incorrect. Given that we have no opportunity to review this prior to publication, let the records show that Illinois Masonic Medical Center:

1. Has a Trauma Center designation
2. Has no Burn Unit
3. Has a Coronary Care Unit
4. Has no Organ Transplant Services
5. Has a Hospice Care Program

Thank you for the opportunity for comment and review the data prior to publication.

Sincerely,

Gerald W. Mungerson
Executive Director

GWM:pr

ILLINOIS VALLEY COMMINITY HOSPITAL

925 WEST ST
PERU , IL 61354

Medicare Hospital Provider Number: 140234

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	825	12	9 - 15	830	12	10 - 16
Cancer	26	77	26 - 60	21	33	21 - 62
Cerebrovascular Accidents	46	24	16 - 42	53	26	18 - 43
Gastrointestinal Catastrophes	5	20	5 - 74	4	25	3 - 80
Infectious Disease	6	50	5 - 74	4	0	9 - 73
Metabolic/Electrolyte Disorders	8	25	6 - 66	5	0	1 - 71
Pulmonary Disease	50	24	13 - 39	44	36	14 - 44
Renal Failure	5	60	10 - 84	7	71	21 - 89
Severe Acute Heart Disease	40	32	21 - 51	38	39	26 - 58
Severe Chronic Heart Disease	44	20	10 - 36	46	28	11 - 38
Severe Trauma	2	50	1 - 93	2	50	1 - 93
Gastrointestinal Disease	84	5	0 - 16	73	1	1 - 11
Gynecologic Disease	9	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	85	2	1 - 11	102	4	1 - 12
Musculoskeletal/Skin Conditions	83	1	1 - 9	86	0	1 - 7
Neuropsychiatric/Sensory Disease	16	0	0 - 89	29	0	0 - 45
Urologic Disease	46	0	0 - 19	40	0	0 - 36

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	108
Occupancy Rate (%):	45
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	33
Percent of Physicians Who Are Board Certified Specialists:	48
Interns and Residents:	0
Registered Nurses:	96
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ILLINOIS VETERANS HOME

1707 N TWELTH STREET
QUINCY, IL 62301

Medicare Hospital Provider Number: 140273

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	179	22	10 - 22	205	27	14 - 26
Cancer	1	100	3 - 99	2	50	3 - 92
Cerebrovascular Accidents	5	60	5 - 77	7	29	9 - 70
Gastrointestinal Catastrophes	2	50	1 - 93	1	100	3 - 99
Infectious Disease	3	33	7 - 88	5	20	9 - 77
Metabolic/Electrolyte Disorders	2	100	3 - 88	10	60	8 - 65
Pulmonary Disease	35	31	14 - 46	48	42	20 - 49
Renal Failure	0	-	-	1	0	2 - 97
Severe Acute Heart Disease	2	0	3 - 88	2	50	5 - 94
Severe Chronic Heart Disease	7	71	11 - 72	7	57	7 - 71
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	9	0	0 - 94	4	0	0 - 93
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	16	0	1 - 32	19	32	1 - 57
Musculoskeletal/Skin Conditions	15	13	0 - 95	16	0	0 - 63
Neuropsychiatric/Sensory Disease	4	0	0 -100	4	0	0 -100
Urologic Disease	4	0	0 -100	5	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	567
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	5
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Illinois Veterans Home
1707 North 12th Street • Quincy, Illinois 62301 • (217)222-8641

September 23, 1988

Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Mrs. Sandra Kappert

Gentlemen:

We appreciate the opportunity to comment on the Medicare Hospital Mortality Information (1987).

We are concerned that our hospital, Schapers Hospital of the Illinois Veterans' Home at Quincy, is presented in an unfair manner when compared to other acute care hospitals. Our hospital serves only a restricted population - members of the Illinois Veterans' Home at Quincy. We do not admit veterans or spouses unless they are members. Because of the limited population served, our population served differs from all other hospitals. Eighty percent (80%) of our population served are already disabled to the point that they are in Nursing Home Care. Thus, even when compared by age and diagnosis, our patients suffer from more serious co-morbid conditions than any General Hospital.

In spite of all our efforts, we expect a higher mortality rate than if we were drawing patients from the general population.

We would like for our hospital not to be published as compared to other general hospitals. We appreciate the service you provide and find it useful in evaluating what we do, but it puts us in an unfair light to people who do not understand what population we admit from. We can understand this may be difficult to do, but our hospital is not available to anyone but our 605 members. Thus, some of the objectives of the publishing do not pertain to us.

On the page titled, "Medicare Hospital Mortality Information," there is a block titled Specialty Services; that is incorrect. Our hospital does not have: Shock/Trauma or Burn Unit nor a Coronary Care Unit nor an Acute Renal Dialysis Unit. We are working to develop a Hospice Care Unit because of the type patients for whom we are responsible.

Thank you for the opportunity to comment.

Very truly yours,

FOR: R. E. Northern
Superintendent

F. H. Chamberlin, M. D.
Medical Director

REN/FHC/jd

INGALLS MEMORIAL HOSPITAL

ONE INGALLS DRIVE
HARVEY, IL 60426

Medicare Hospital Provider Number: 140191

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,617	13	11 - 15	3,810	14	11 - 15
Cancer	121	45	30 - 52	150	49	33 - 54
Cerebrovascular Accidents	146	18	20 - 35	157	22	20 - 36
Gastrointestinal Catastrophes	37	32	21 - 55	38	42	17 - 52
Infectious Disease	47	38	20 - 51	63	46	30 - 59
Metabolic/Electrolyte Disorders	54	19	13 - 40	88	33	18 - 44
Pulmonary Disease	231	30	19 - 35	180	36	19 - 37
Renal Failure	22	23	13 - 64	19	42	15 - 71
Severe Acute Heart Disease	133	37	30 - 49	122	43	30 - 50
Severe Chronic Heart Disease	219	27	17 - 30	245	29	17 - 31
Severe Trauma	7	43	5 - 72	11	45	9 - 66
Gastrointestinal Disease	270	3	2 - 7	284	4	2 - 8
Gynecologic Disease	21	5	0 -100	38	0	0 - 64
Low-Risk Heart Disease	502	3	2 - 6	516	3	2 - 6
Musculoskeletal/Skin Conditions	304	2	1 - 5	337	2	1 - 5
Neuropsychiatric/Sensory Disease	206	2	1 - 8	205	2	1 - 7
Urologic Disease	136	2	0 - 9	158	1	1 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	537
Occupancy Rate (%):	77
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	356
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	369
Licensed Practical Nurses:	29

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

IROQUOIS MEMORIAL HOSPITAL

200 FAIRMAN STREET
WATSEKA, IL 60970

Medicare Hospital Provider Number: 140167

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	654	13	11 - 17	649	13	11 - 17
Cancer	10	60	18 - 73	13	31	17 - 66
Cerebrovascular Accidents	24	29	12 - 48	28	32	15 - 50
Gastrointestinal Catastrophes	5	20	4 - 74	2	50	3 - 92
Infectious Disease	9	33	14 - 71	9	0	21 - 60
Metabolic/Electrolyte Disorders	20	15	11 - 48	14	0	10 - 41
Pulmonary Disease	68	34	18 - 43	82	28	15 - 38
Renal Failure	3	67	12 - 94	0	-	-
Severe Acute Heart Disease	33	42	23 - 57	29	41	25 - 60
Severe Chronic Heart Disease	51	24	16 - 40	54	19	14 - 36
Severe Trauma	0	-	-	2	50	3 - 92
Gastrointestinal Disease	62	3	0 - 19	44	5	0 - 27
Gynecologic Disease	11	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	78	1	1 - 9	99	0	3 - 7
Musculoskeletal/Skin Conditions	44	0	0 - 14	31	3	0 - 27
Neuropsychiatric/Sensory Disease	18	6	1 - 40	23	0	0 - 76
Urologic Disease	37	0	0 - 23	35	0	0 - 34

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

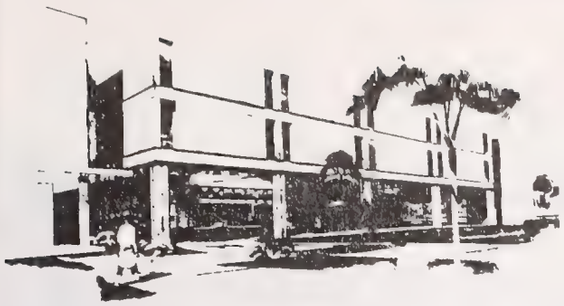
Total Beds (#):	119
Occupancy Rate (%):	61
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	17
Percent of Physicians Who Are Board Certified Specialists:	12
Interns and Residents:	0
Registered Nurses:	54
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No



THE IROQUOIS
MEMORIAL HOSPITAL (A General Nonprofit Hospital)
AND THE IROQUOIS RESIDENT HOME
200 FAIRMAN AVENUE TELEPHONE (815) 432-5201
WATSEKA, ILLINOIS 60970

CHIEF EXECUTIVE OFFICER, [redacted]

Medicare Provider Number: 140167

RESPONSE TO 1987 MEDICARE MORTALITY INFORMATION

The statistics provided by the Health Care Financing Administration show that there were 654 patients whose last discharge in 1987 was from Iroquois Memorial Hospital. The mortality rate for the patients included in this study was 13%, which is within the predicted range of 11%-17%.

The actual death rate of patients who expired at Iroquois Memorial Hospital for fiscal year 1987 was 2.9%, a commendable rate when consideration is given to the average age of the patient population. More than 46% of the patients treated were above the age of 65 years.

Of the 654 patients cited in this report, 566 patients expired more than 30 days after their last admission, 56 patients expired during the last hospital stay, and only 32 patients expired less than 30 days after being discharged. Of those 32, 28 patients were transferred to another facility for further care (such as nursing homes or veterans' hospitals) and 4 patients were discharged to home. Of those 4 patients discharged to home, two were known to be in terminal stages of cancer. The average age of the other two patients was 86 years.

JACKSON PARK HOSPITAL FOUNDATION

7531 S STONEY ISLAND AVE
CHICAGO, IL 60649

Medicare Hospital Provider Number: 140177

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	811	17	11 - 17	887	15	10 - 16
Cancer	20	55	22 - 65	16	63	20 - 66
Cerebrovascular Accidents	54	43	15 - 42	39	33	12 - 43
Gastrointestinal Catastrophes	11	82	12 - 61	2	0	7 - 91
Infectious Disease	14	43	14 - 64	11	55	15 - 70
Metabolic/Electrolyte Disorders	21	48	14 - 58	45	27	12 - 43
Pulmonary Disease	36	31	15 - 47	39	41	14 - 46
Renal Failure	9	44	8 - 74	9	44	11 - 77
Severe Acute Heart Disease	33	55	23 - 57	30	53	24 - 60
Severe Chronic Heart Disease	62	18	13 - 33	49	22	13 - 38
Severe Trauma	1	0	1 - 97	1	100	2 - 97
Gastrointestinal Disease	50	8	0 - 29	54	7	0 - 24
Gynecologic Disease	3	0	0 -100	0	-	-
Low-Risk Heart Disease	119	3	1 - 10	137	2	1 - 8
Musculoskeletal/Skin Conditions	44	5	0 - 37	86	2	0 - 14
Neuropsychiatric/Sensory Disease	43	2	0 - 58	29	3	0 - 73
Urologic Disease	15	0	0 -100	23	0	0 - 71

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	255
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	68
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	9
Registered Nurses:	136
Licensed Practical Nurses:	27

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

JERSEY COMMUNITY HOSPITAL DISTRICT

400 MAPLE SUMMIT ROAD
JERSEYVILLE, IL 62052

Medicare Hospital Provider Number: 140059

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	545	16	12 - 19	557	11	10 - 17
Cancer	7	86	23 - 79	3	67	12 - 93
Cerebrovascular Accidents	34	32	15 - 47	22	27	16 - 53
Gastrointestinal Catastrophes	5	40	4 - 78	1	100	3 - 98
Infectious Disease	6	33	11 - 77	5	40	6 - 78
Metabolic/Electrolyte Disorders	11	18	6 - 57	8	0	7 - 51
Pulmonary Disease	71	20	17 - 38	80	20	17 - 38
Renal Failure	5	60	16 - 90	7	71	16 - 83
Severe Acute Heart Disease	21	43	23 - 64	8	38	14 - 74
Severe Chronic Heart Disease	45	38	14 - 43	44	25	15 - 42
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	43	5	0 - 26	62	3	1 - 16
Gynecologic Disease	7	0	1 - 61	5	0	0 -100
Low-Risk Heart Disease	68	1	1 - 11	63	0	1 - 8
Musculoskeletal/Skin Conditions	45	0	0 - 17	45	2	0 - 25
Neuropsychiatric/Sensory Disease	14	7	0 -100	12	8	0 - 98
Urologic Disease	24	4	0 - 75	26	0	0 - 88

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	67
Occupancy Rate (%):	48
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	15
Percent of Physicians Who Are Board Certified Specialists:	47
Interns and Residents:	0
Registered Nurses:	40
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

JOHN AND MARY KIRBY HOSPITAL

1111 NORTH STATE STREET
MONTICELLO, IL 61856

Medicare Hospital Provider Number: 140230

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	203	17	10 - 21	190	12	8 - 18
Cancer	7	86	23 - 79	4	25	12 - 85
Cerebrovascular Accidents	14	21	13 - 57	6	17	9 - 70
Gastrointestinal Catastrophes	0	-	-	1	0	0 - 98
Infectious Disease	2	50	7 - 95	2	0	3 - 88
Metabolic/Electrolyte Disorders	5	0	3 - 65	2	50	4 - 93
Pulmonary Disease	16	38	13 - 59	12	50	12 - 65
Renal Failure	1	0	2 - 97	2	100	11 - 97
Severe Acute Heart Disease	2	100	1 - 89	4	50	11 - 87
Severe Chronic Heart Disease	15	33	9 - 55	12	17	7 - 53
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	21	0	0 - 51	25	0	0 - 33
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	10	0	0 - 87	24	8	1 - 35
Musculoskeletal/Skin Conditions	18	0	0 - 49	16	6	0 - 88
Neuropsychiatric/Sensory Disease	10	10	0 - 98	9	11	0 -100
Urologic Disease	3	0	0 -100	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	18
Occupancy Rate (%):	43
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	27
Percent of Physicians Who Are Board Certified Specialists:	89
Interns and Residents:	0
Registered Nurses:	14
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

John and Mary Kirby Hospital
Monticello, Illinois

Provider Number: 14-0230

The hospital's comments consisted primarily of annotations to the patient specific information and/or the hospital characteristics generated by the Health Care Financing Administration and provided to the hospital. We did not publish this annotated information.

JOHN F KENNEDY MEDICAL CENTER

5645 W ADDISON
CHICAGO, IL 60634

Medicare Hospital Provider Number: 140251

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,674	16	12 - 16	2,983	14	10 - 14
Cancer	54	57	28 - 57	67	42	28 - 55
Cerebrovascular Accidents	161	30	20 - 36	146	35	20 - 38
Gastrointestinal Catastrophes	28	18	19 - 52	27	33	17 - 56
Infectious Disease	25	36	21 - 60	37	32	21 - 55
Metabolic/Electrolyte Disorders	71	38	14 - 42	61	33	11 - 40
Pulmonary Disease	147	31	18 - 36	135	30	19 - 38
Renal Failure	8	38	8 - 75	15	47	16 - 75
Severe Acute Heart Disease	180	43	32 - 49	110	55	29 - 50
Severe Chronic Heart Disease	191	21	16 - 30	221	19	17 - 30
Severe Trauma	10	40	7 - 66	7	43	6 - 72
Gastrointestinal Disease	178	7	1 - 11	206	5	1 - 9
Gynecologic Disease	16	0	0 -100	19	0	0 -100
Low-Risk Heart Disease	365	3	2 - 6	391	3	2 - 6
Musculoskeletal/Skin Conditions	199	3	1 - 7	283	2	1 - 6
Neuropsychiatric/Sensory Disease	66	0	0 - 10	91	1	0 - 10
Urologic Disease	118	1	1 - 7	99	0	1 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	416
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	209
Percent of Physicians Who Are Board Certified Specialists:	56
Interns and Residents:	11
Registered Nurses:	237
Licensed Practical Nurses:	37

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Our Lady of the
Resurrection
Medical Center

5645 West Addison Street Chicago, Illinois 60634-4455 312-282-7000

October 19, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Thank you, once again, for sharing with OUR LADY OF THE RESURRECTION MEDICAL CENTER (formerly JFK Medical Center) the selected mortality rate information which was developed by HCFA and for allowing our comments prior to publication.

Our Lady of the Resurrection's Governing Body, Administration, and Medical Staff are committed to quality. We have numerous internal review processes established to review the delivery of quality patient care. The hospital mortality statistics are considered one of several important components that are essential to our quality review process. We feel it is essential that consumers are made aware that the HCFA mortality statistics can not be viewed in isolation to determine the quality of care or hospital performance.

Although we are encouraged by the refinements made in your statistical model, we continue to be concerned about the potential misleading impact on the consumer when this data is not correlated further with hospital specific characteristics. Particular emphasis should be placed on patient mix and severity of illness factors in order for your data to be a valid and useful tool for the public. For example, patients at Our Lady of the Resurrection are usually complex. Over sixty-five (65%) of our patient population are Medicare patients and are, therefore, typically at higher risk. In addition, our patient types are more critically ill with fifty-three (53%) of our cases being admitted through the Emergency Room.

Your statistics present not only the percentage of patients who expired in our facility, but also include patients who expired after discharge from our facility but within thirty (30) days of admission. Typically, cases where death occurs within the first forty-eight (48) hours of admission are classified as non-institutional deaths and are not attributable to the hospital's net death rate. However, due to the fact that every death is of extreme importance and concern to us, we deem it necessary to have each case studied by the medical staff to determine if and how it might have been prevented. Our mortality statistics are a very significant part of our peer review process.

We support your efforts in attempting to provide the public with information concerning the health care system, however, we feel there needs to be an ongoing refinement in the methodology utilized to develop these statistics so that one day this will be a worthy and useful tool for the consumer.

Respectfully yours,

Sister Bonaventure, C.R.
President
Our Lady of the Resurrection Medical Center

SBCR/rs
MISCL3

KATHERINE SHAW BETHEA HOSP

403 E 1ST ST
DIXON, IL 61021

Medicare Hospital Provider Number: 140012

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	879	14	10 - 15	880	13	10 - 16
Cancer	21	57	21 - 63	12	58	20 - 72
Cerebrovascular Accidents	30	23	12 - 43	31	26	15 - 47
Gastrointestinal Catastrophes	10	40	11 - 68	4	50	9 - 85
Infectious Disease	21	43	17 - 59	21	29	18 - 59
Metabolic/Electrolyte Disorders	13	31	7 - 58	15	40	9 - 59
Pulmonary Disease	58	31	16 - 41	54	30	17 - 43
Renal Failure	3	33	5 - 88	2	100	6 - 91
Severe Acute Heart Disease	34	35	20 - 53	52	42	25 - 52
Severe Chronic Heart Disease	61	28	14 - 37	44	11	14 - 35
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	49	2	1 - 16	57	5	0 - 32
Gynecologic Disease	11	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	111	3	1 - 9	93	3	1 - 11
Musculoskeletal/Skin Conditions	98	3	0 - 15	93	1	1 - 9
Neuropsychiatric/Sensory Disease	21	0	0 - 50	21	0	0 - 34
Urologic Disease	23	4	0 - 92	21	5	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	121
Occupancy Rate (%):	55
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	32
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	88
Licensed Practical Nurses:	24

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No



14 October 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert,

Thank you for forwarding us a copy of the 1987 Medicare Hospital Mortality information. We appreciate the advance notice of the numbers and an opportunity to comment.

Specifically, I need to advise you of an error in the Hospital Characteristics section of the report. During the time in question, Katherine Shaw Bethea Hospital had 121 beds set up and staffed in contrast to the 62 beds noted in the report. The occupancy percentage as listed is correct on the basis of 121 beds. The per bed staffing statistics are, however, incorrect owing to the uses of the wrong bed count.

In addition, the facility does not qualify for designation as an Organ Transplant service. Therefore, the "yes" in the specialty service listing is incorrect.

Thank you for your attention to this matter.

Sincerely,

Kevin T. Marx
Vice President
Marketing and Planning

KEWANEE PUBLIC HOSPITAL

719 ELLIOTT ST
KEWANEE, IL 61443

Medicare Hospital Provider Number: 140036

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	728	14	11 - 17	739	14	9 - 16
Cancer	22	36	21 - 61	14	64	20 - 69
Cerebrovascular Accidents	32	31	15 - 47	26	35	11 - 48
Gastrointestinal Catastrophes	5	40	8 - 80	8	50	13 - 75
Infectious Disease	2	50	3 - 92	2	0	0 - 95
Metabolic/Electrolyte Disorders	13	38	5 - 59	4	0	1 - 80
Pulmonary Disease	83	27	19 - 40	84	24	15 - 36
Renal Failure	12	75	21 - 79	2	100	10 - 95
Severe Acute Heart Disease	22	41	23 - 63	29	45	25 - 61
Severe Chronic Heart Disease	54	19	14 - 36	57	18	12 - 34
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	79	3	1 - 12	72	1	1 - 11
Gynecologic Disease	9	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	83	5	1 - 14	89	1	1 - 8
Musculoskeletal/Skin Conditions	49	2	1 - 17	68	3	0 - 21
Neuropsychiatric/Sensory Disease	10	0	0 - 99	9	0	0 - 90
Urologic Disease	36	6	0 - 50	24	4	1 - 33

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	111
Occupancy Rate (%):	28
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	19
Percent of Physicians Who Are Board Certified Specialists:	53
Interns and Residents:	0
Registered Nurses:	57
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

KISHWAUKEE COMMUNITY HOSPITAL

RT 23 BETHANY ROAD
DE KALB, IL 60115

Medicare Hospital Provider Number: 140286

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	861	11	9 - 14	702	9	7 - 13
Cancer	20	75	22 - 62	13	0	30 - 60
Cerebrovascular Accidents	28	32	12 - 47	30	20	13 - 43
Gastrointestinal Catastrophes	10	20	13 - 64	3	0	3 - 79
Infectious Disease	9	44	13 - 72	7	29	16 - 77
Metabolic/Electrolyte Disorders	6	17	6 - 69	6	17	1 - 76
Pulmonary Disease	42	21	15 - 42	32	25	11 - 43
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	40	40	26 - 57	41	39	22 - 53
Severe Chronic Heart Disease	33	18	11 - 39	25	28	8 - 44
Severe Trauma	1	0	0 -100	1	0	2 - 97
Gastrointestinal Disease	67	3	1 - 15	68	4	0 - 19
Gynecologic Disease	8	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	89	1	2 - 9	74	0	1 - 7
Musculoskeletal/Skin Conditions	85	7	0 - 20	71	1	0 - 13
Neuropsychiatric/Sensory Disease	58	5	0 - 48	43	5	0 - 73
Urologic Disease	73	1	0 - 13	51	4	0 - 43

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	132
Occupancy Rate (%):	42
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	45
Percent of Physicians Who Are Board Certified Specialists:	87
Interns and Residents:	0
Registered Nurses:	113
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LA GRANGE MEMORIAL HOSPITAL

5101 WILLOW SPRINGS RD
LA GRANGE, IL 60525

Medicare Hospital Provider Number: 140065

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,333	13	10 - 14	2,418	12	10 - 14
Cancer	52	33	25 - 53	78	41	26 - 51
Cerebrovascular Accidents	113	33	19 - 37	118	22	19 - 36
Gastrointestinal Catastrophes	25	44	18 - 59	19	26	11 - 54
Infectious Disease	32	47	22 - 58	35	34	22 - 56
Metabolic/Electrolyte Disorders	27	37	12 - 52	25	40	12 - 52
Pulmonary Disease	131	31	18 - 37	120	25	18 - 37
Renal Failure	8	50	15 - 81	16	63	19 - 76
Severe Acute Heart Disease	88	38	28 - 50	86	47	29 - 52
Severe Chronic Heart Disease	150	22	15 - 30	142	24	14 - 30
Severe Trauma	6	17	7 - 70	9	44	9 - 69
Gastrointestinal Disease	219	5	1 - 8	237	4	1 - 8
Gynecologic Disease	15	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	277	3	1 - 6	283	4	2 - 7
Musculoskeletal/Skin Conditions	265	3	1 - 6	244	1	1 - 5
Neuropsychiatric/Sensory Disease	68	6	0 - 32	68	3	0 - 16
Urologic Disease	79	1	0 - 12	87	0	1 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	236
Occupancy Rate (%):	63
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	139
Percent of Physicians Who Are Board Certified Specialists:	87
Interns and Residents:	15
Registered Nurses:	278
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

LA HARPE HOSP

B ST ARCHER AVE
LA HARPE, IL 61450

Medicare Hospital Provider Number: 140241

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	26	27	3 - 41	43	12	3 - 26
Cancer	1	100	2 - 97	0	-	-
Cerebrovascular Accidents	2	50	1 - 93	1	0	0 - 98
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	2	0	1 - 91	2	0	1 - 90
Pulmonary Disease	5	60	2 - 78	8	0	4 - 48
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	1	100	0 - 98	1	100	0 -100
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	2	0	0 -100	6	17	0 -100
Gynecologic Disease	1	0	0 -100	0	-	-
Low-Risk Heart Disease	1	0	0 -100	3	33	0 - 91
Musculoskeletal/Skin Conditions	5	0	0 -100	10	0	0 - 96
Neuropsychiatric/Sensory Disease	1	0	0 -100	1	0	0 -100
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	64
Occupancy Rate (%):	86
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	4
Percent of Physicians Who Are Board Certified Specialists:	25
Interns and Residents:	0
Registered Nurses:	5
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LAKE FOREST HOSPITAL

660 N WESTMORELAND ROAD
LAKE FOREST, IL 60045

Medicare Hospital Provider Number: 140130

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,000	13	11 - 16	1,041	12	10 - 16
Cancer	48	31	26 - 55	53	45	29 - 58
Cerebrovascular Accidents	45	20	15 - 40	45	18	15 - 39
Gastrointestinal Catastrophes	5	40	14 - 85	11	27	8 - 62
Infectious Disease	18	22	17 - 58	18	17	19 - 58
Metabolic/Electrolyte Disorders	27	30	15 - 53	23	13	7 - 42
Pulmonary Disease	70	34	16 - 40	65	23	14 - 37
Renal Failure	5	60	11 - 85	7	57	17 - 86
Severe Acute Heart Disease	27	44	21 - 58	24	33	27 - 65
Severe Chronic Heart Disease	39	23	10 - 38	32	25	12 - 43
Severe Trauma	0	-	-	2	100	3 - 88
Gastrointestinal Disease	79	4	1 - 13	97	2	1 - 10
Gynecologic Disease	18	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	79	4	0 - 15	82	7	1 - 19
Musculoskeletal/Skin Conditions	113	4	1 - 12	106	5	1 - 12
Neuropsychiatric/Sensory Disease	30	3	0 - 47	32	3	0 - 80
Urologic Disease	42	7	0 - 71	47	0	0 - 24

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	249
Occupancy Rate (%):	77
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	185
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	198
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

LAKE FOREST HOSPITAL
660 North Westmoreland Road • Lake Forest, Illinois 60045 • 312 234-5600

COMMENTS ON MEDICARE 1987 HOSPITAL MORTALITY DATA
October 24, 1988

The HCFA mortality rate is the total number of Medicare patients who died within the 30 days of admission divided by the total number of Medicare patients whose last admission in 1987 was to Lake Forest Hospital. This statistic should not be confused with the inpatient mortality rate. However, it is likely that when this data is published it will be interpreted in this manner. The inpatient mortality rate is the total number of patients who died during their stay divided by the total number of patients admitted during the same period.

Many of the Medicare patients had multiple admissions for severe, chronic and in many cases, worsening conditions. Only the last admission appears in the data. A number of the deaths were expected both by the physician and the patient. Hospice, Home Care, and Extended Care in a nursing facility, were offered in numerous instances. All of these services are provided by Lake Forest Hospital.

Discharged patients who died within this 30-day time frame may also have died from causes unrelated to their hospital stay. We have not verified whether these were accidental or unrelated deaths.

Unfortunately, the terminology used by HCFA can be misleading. In one of the high risk categories, "Metabolic and Electrolyte Disturbances", a more detailed review was completed as there appeared to be a substantial increase in the mortality rate percentage even though it remained within the predicted range. Of the eight patients in this category, six were patients who had been or were still being treated for cancer. The manner in which the principal diagnosis must be coded permits the public to be unaware of the cancer comorbidity and the fact that the progression of cancer is often the precipitator of metabolic disturbances such as dehydration. Death from cancer is probably understood better than by such terminology as "Metabolic and Electrolyte Disturbances".

Our purpose in commenting on the HCFA data is to emphasize that the data is not a measure of hospital performance or quality of care and services provided. The data can and is being used to better focus on our own quality assurance activities.

William G. Ries
President

LAKESIDE COMMUNITY HOSPITAL

225 WEST CERMAK RD
CHICAGO, IL 60616

Medicare Hospital Provider Number: 140226

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	187	5	4 - 11	213	11	6 - 16
Cancer	1	0	0 - 99	3	67	11 - 92
Cerebrovascular Accidents	1	0	0 -100	3	33	1 - 88
Gastrointestinal Catastrophes	1	0	0 - 99	1	100	0 - 98
Infectious Disease	1	0	1 - 97	0	-	-
Metabolic/Electrolyte Disorders	12	8	6 - 49	7	29	5 - 69
Pulmonary Disease	4	25	2 - 80	7	14	5 - 64
Renal Failure	0	-	-	3	0	9 - 84
Severe Acute Heart Disease	1	100	0 - 98	1	100	0 -100
Severe Chronic Heart Disease	11	27	5 - 58	16	25	7 - 51
Severe Trauma	0	-	-	2	50	1 - 93
Gastrointestinal Disease	3	0	0 -100	17	0	0 - 67
Gynecologic Disease	1	0	0 -100	0	-	-
Low-Risk Heart Disease	20	5	0 - 57	23	0	0 - 29
Musculoskeletal/Skin Conditions	17	0	0 - 99	47	0	0 - 21
Neuropsychiatric/Sensory Disease	62	0	0 - 13	12	0	0 -100
Urologic Disease	6	0	0 -100	5	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	124
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

LAWRENCE COUNTY MEMORIAL HOSPITAL

WEST STATE STREET
LAWRENCEVILLE, IL 62439

Medicare Hospital Provider Number: 140024

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	481	16	10 - 17	547	15	11 - 18
Cancer	7	29	13 - 75	4	100	7 - 72
Cerebrovascular Accidents	37	38	15 - 47	39	8	19 - 39
Gastrointestinal Catastrophes	3	67	4 - 86	4	75	8 - 82
Infectious Disease	8	25	13 - 71	8	50	11 - 73
Metabolic/Electrolyte Disorders	16	19	6 - 50	29	28	12 - 48
Pulmonary Disease	45	27	15 - 43	52	33	16 - 43
Renal Failure	2	100	10 - 95	4	75	11 - 88
Severe Acute Heart Disease	18	28	19 - 60	13	38	14 - 63
Severe Chronic Heart Disease	23	43	11 - 51	41	29	14 - 43
Severe Trauma	0	-	-	1	0	0 - 98
Gastrointestinal Disease	53	0	1 - 10	51	0	2 - 10
Gynecologic Disease	5	0	0 -100	6	33	0 -100
Low-Risk Heart Disease	36	0	0 - 16	52	2	1 - 14
Musculoskeletal/Skin Conditions	51	6	0 - 29	39	3	1 - 21
Neuropsychiatric/Sensory Disease	32	0	0 - 37	21	0	0 - 61
Urologic Disease	14	7	0 -100	11	9	0 - 89

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	54
Occupancy Rate (%):	37
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	30
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	0
Registered Nurses:	32
Licensed Practical Nurses:	1

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LAWRENCE
COUNTY
MEMORIAL
HOSPITAL

WEST STATE STREET
LAWRENCEVILLE, ILLINOIS 62439
PH. (618) 943-2381

Gerald Waldroup
Administrator

Provider #
140024

10/21/88

Mrs. Sandra Kappert
Health Standards and Quality Bureau
Health Care Financing Admin.
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert,

The mortality statistics, compiled by HCFA, specific to Lawrence County Memorial Hospital are irrelevant and could be misleading.

Patients on this list are grouped under the diagnosis of their last hospital admission and not necessarily their cause of death.

The data does not measure hospital performance, and viewed in isolation could be damaging to the institution.

Patient-specific listings should just include those patients that did expire in the health care facility, and group them by principal diagnosis. This would better reflect accurate mortality statistics, even if the principal diagnosis is not always the cause of death.

This may not be a solution, however, the statistics as they now exist are not helpful to hospitals, and give no insight into the quality of care they provide.

Sincerely,

Janet Kavanaugh

Janet Kavanaugh
Quality Assurance

LEYDEN COMMUNITY HOSPITAL

365 EAST NORTH AVENUE
NORTHLAKE, IL 60164

Medicare Hospital Provider Number: 140295

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	178	10	7 - 17	279	9	5 - 13
Cancer	6	33	6 - 73	12	33	15 - 66
Cerebrovascular Accidents	5	40	2 - 78	5	40	4 - 77
Gastrointestinal Catastrophes	4	25	3 - 80	2	0	5 - 89
Infectious Disease	4	50	7 - 84	2	0	2 - 88
Metabolic/Electrolyte Disorders	5	40	1 - 80	5	0	1 - 70
Pulmonary Disease	11	36	9 - 63	12	25	5 - 56
Renal Failure	1	0	2 - 97	1	0	2 - 97
Severe Acute Heart Disease	5	20	11 - 77	6	33	7 - 74
Severe Chronic Heart Disease	12	8	5 - 46	12	33	7 - 59
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	15	0	0 - 91	26	4	0 - 65
Gynecologic Disease	0	-	-	2	0	0 -100
Low-Risk Heart Disease	16	13	0 - 90	19	0	0 - 35
Musculoskeletal/Skin Conditions	38	0	0 - 29	72	0	0 - 12
Neuropsychiatric/Sensory Disease	9	0	0 - 99	11	0	0 -100
Urologic Disease	4	0	0 -100	11	0	0 - 97

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1984

Total Beds (#):	154
Ownership/Control:	Church

STAFFING

Interns and Residents:	0
Registered Nurses:	120
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

LINCOLN WEST MEDICAL CENTER

2544 W MONTROSE AVE
CHICAGO, IL 60618

Medicare Hospital Provider Number: 140192

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	498	10	9 - 15	562	12	9 - 15
Cancer	10	50	8 - 66	9	22	16 - 70
Cerebrovascular Accidents	25	12	18 - 46	22	14	13 - 45
Gastrointestinal Catastrophes	3	33	11 - 91	7	57	14 - 78
Infectious Disease	5	20	4 - 74	11	45	13 - 68
Metabolic/Electrolyte Disorders	11	36	7 - 63	14	21	9 - 56
Pulmonary Disease	22	32	11 - 50	48	31	14 - 42
Renal Failure	2	0	9 - 94	5	40	10 - 85
Severe Acute Heart Disease	13	31	18 - 66	10	40	13 - 69
Severe Chronic Heart Disease	31	26	12 - 43	30	30	12 - 45
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	38	5	0 - 37	58	7	1 - 21
Gynecologic Disease	5	0	0 -100	4	0	0 - 93
Low-Risk Heart Disease	51	2	1 - 15	56	0	1 - 10
Musculoskeletal/Skin Conditions	46	2	0 - 19	94	2	0 - 11
Neuropsychiatric/Sensory Disease	59	0	0 - 22	16	0	0 - 98
Urologic Disease	12	0	0 - 71	22	5	0 - 80

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	201
Occupancy Rate (%):	25
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	87
Percent of Physicians Who Are Board Certified Specialists:	84
Interns and Residents:	3
Registered Nurses:	66
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LITTLE COMPANY OF MARY HOSPITAL INC

2800 W 95TH ST
EVERGREEN PARK , IL 60642

Medicare Hospital Provider Number: 140179

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,906	12	10 - 14	2,889	13	10 - 14
Cancer	124	35	27 - 48	100	44	28 - 52
Cerebrovascular Accidents	126	17	18 - 33	108	26	18 - 37
Gastrointestinal Catastrophes	25	44	16 - 57	24	50	20 - 62
Infectious Disease	35	23	23 - 55	30	33	20 - 56
Metabolic/Electrolyte Disorders	62	32	20 - 49	63	35	13 - 42
Pulmonary Disease	142	23	18 - 35	145	23	17 - 34
Renal Failure	19	47	16 - 71	15	20	16 - 71
Severe Acute Heart Disease	126	38	30 - 49	132	32	29 - 47
Severe Chronic Heart Disease	129	22	15 - 31	138	23	15 - 31
Severe Trauma	7	29	6 - 70	3	0	5 - 80
Gastrointestinal Disease	234	3	1 - 7	240	5	1 - 8
Gynecologic Disease	31	3	0 -100	22	0	0 - 62
Low-Risk Heart Disease	290	3	2 - 6	280	1	2 - 6
Musculoskeletal/Skin Conditions	312	2	1 - 5	357	3	1 - 6
Neuropsychiatric/Sensory Disease	103	1	1 - 8	70	1	0 - 15
Urologic Disease	140	1	0 - 9	124	2	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	368
Occupancy Rate (%):	73
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	235
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	423
Licensed Practical Nurses:	25

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

LORETTO HOSP

645 SOUTH CENTRAL AVE
CHICAGO, IL 60644

Medicare Hospital Provider Number: 140083

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	568	16	10 - 17	592	14	9 - 15
Cancer	13	54	19 - 70	16	50	18 - 65
Cerebrovascular Accidents	40	25	15 - 43	32	38	15 - 49
Gastrointestinal Catastrophes	7	43	7 - 73	4	25	6 - 81
Infectious Disease	12	50	19 - 71	4	50	6 - 83
Metabolic/Electrolyte Disorders	12	8	7 - 49	8	13	4 - 60
Pulmonary Disease	27	19	10 - 42	32	31	12 - 46
Renal Failure	2	100	0 - 92	6	0	10 - 69
Severe Acute Heart Disease	37	62	23 - 55	35	63	25 - 57
Severe Chronic Heart Disease	28	18	11 - 41	22	9	8 - 37
Severe Trauma	0	-	-	1	0	0 -100
Gastrointestinal Disease	35	9	0 - 47	39	3	1 - 21
Gynecologic Disease	4	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	73	5	1 - 16	78	5	0 - 18
Musculoskeletal/Skin Conditions	53	6	1 - 20	68	9	0 - 44
Neuropsychiatric/Sensory Disease	32	0	0 - 67	30	3	0 - 94
Urologic Disease	12	8	0 - 96	26	0	0 - 70

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	212
Occupancy Rate (%):	68
Ownership/Control:	Church

STAFFING

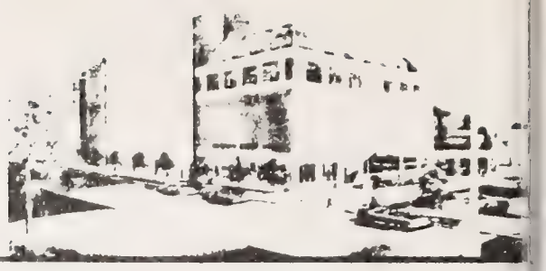
Total Number of Physicians:	111
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	0
Registered Nurses:	118
Licensed Practical Nurses:	16

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Loretto Hospital

645 South Central Avenue • Chicago, Illinois 60644-9987 • Tel 626-4300 848-8780



October 21, 1988

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

William L. Roper, M.D.
Administrator
Health Care Financing Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: MEDICARE PROVIDER NUMBER: 140083

Dear Doctor Roper:

Our hospital has had the opportunity to review the mortality data that was sent to us in September.

In regard to your specific concern, please be informed that we could not find any records that were inaccurate regarding patient admission to our facility.

In general, we find the data representing Loretto Hospital to be indicative of good overall performance for a relatively small inner city community hospital. Specifically though, the hospital has found that the actual mortality rate for severe acute heart disease was actually lower than that displayed in the HCFA data report due largely to sequencing errors. In fact, upon analysis of the specific data, while acute cardiopulmonary arrest was found to be the terminal event, other clinical factors than heart disease, e.g. sepsis and pulmonary embolism were found to be the underlying cause.

Again, this year, we believe that the use of a 30 day post-admission mortality rate attributes to hospital deaths unrelated to the condition of the patient that was under treatment at the time of discharge. Secondly, using the last admission will overestimate the probability of having a hospital stay result in death since the sample of cases examined is biased toward those resulting in death.

Thank you very much for allowing us to screen this data and provide comment before public release. Reviews of this nature, along with additional developed analysis of practice patterns, should help continue to maximize the quality of care provided our patients.

Sincerely,

Sister Marion

Sister Marion
President and
Chief Executive Officer

SM:pw

LOUIS A WEISS MEMORIAL HOSPITAL

4646 N MARINE DRIVE
CHICAGO, IL 60640

Medicare Hospital Provider Number: 140082

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,229	13	12 - 16	2,431	13	11 - 16
Cancer	79	42	31 - 57	93	39	32 - 56
Cerebrovascular Accidents	84	12	21 - 37	81	22	19 - 39
Gastrointestinal Catastrophes	17	65	21 - 67	24	50	13 - 55
Infectious Disease	64	38	27 - 55	60	47	26 - 56
Metabolic/Electrolyte Disorders	52	25	15 - 45	60	18	13 - 39
Pulmonary Disease	120	29	21 - 40	143	32	21 - 40
Renal Failure	14	14	18 - 71	11	27	8 - 70
Severe Acute Heart Disease	91	46	31 - 53	82	49	28 - 51
Severe Chronic Heart Disease	94	15	18 - 34	100	27	17 - 36
Severe Trauma	5	60	4 - 78	10	30	7 - 64
Gastrointestinal Disease	159	4	2 - 9	164	5	1 - 10
Gynecologic Disease	16	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	303	2	2 - 6	349	1	2 - 6
Musculoskeletal/Skin Conditions	184	3	1 - 8	197	3	1 - 7
Neuropsychiatric/Sensory Disease	75	3	2 - 12	75	1	0 - 12
Urologic Disease	94	3	0 - 15	116	0	1 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	284
Occupancy Rate (%):	76
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	135
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	43
Registered Nurses:	304
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LUTHERAN GENERAL HOSP-LINCOLN PARK

2035 NORTH LINCOLN AVENUE
CHICAGO, IL 60614

Medicare Hospital Provider Number: 140017

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	903	15	12 - 18	1,037	10	11 - 16
Cancer	35	51	29 - 64	35	37	26 - 59
Cerebrovascular Accidents	27	26	16 - 50	42	14	16 - 40
Gastrointestinal Catastrophes	15	20	13 - 57	8	50	10 - 72
Infectious Disease	37	51	27 - 62	27	37	25 - 63
Metabolic/Electrolyte Disorders	16	0	12 - 40	19	21	12 - 52
Pulmonary Disease	62	23	16 - 39	63	17	19 - 41
Renal Failure	6	50	8 - 80	4	50	5 - 85
Severe Acute Heart Disease	41	39	26 - 57	30	47	26 - 61
Severe Chronic Heart Disease	47	23	14 - 39	39	8	15 - 35
Severe Trauma	1	0	2 - 97	2	0	3 - 88
Gastrointestinal Disease	74	4	1 - 15	72	4	1 - 15
Gynecologic Disease	6	17	0 -100	4	0	0 -100
Low-Risk Heart Disease	104	1	2 - 8	112	2	1 - 8
Musculoskeletal/Skin Conditions	67	6	1 - 18	121	2	1 - 8
Neuropsychiatric/Sensory Disease	13	0	0 - 97	17	0	0 - 92
Urologic Disease	34	0	0 - 33	43	0	0 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	330
Ownership/Control:	Church

STAFFING

Interns and Residents:	0
Registered Nurses:	134
Licensed Practical Nurses:	9

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Lutheran General Hospital
Lincoln Park

2035 North Lincoln Avenue
Chicago, Illinois 60614

Telephone 312/975-5000

VIA FEDERAL EXPRESS

October 21, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Sandra Kappert

Re: HCFA Mortality Data
Lutheran General Hospital -
Lincoln Park
Medicare Provider #14-0017

Dear Ms. Kappert:

We have reviewed the mortality rates detailed in your letter from September 15, 1988, and we are pleased that the mortality rates for Lutheran General Hospital - Lincoln Park have fallen well within the expected range for each category. It remains our contention that this type of data highlights our quality assurance activities, but that mortality data is not a complete representation of quality health care.

Our QA/UR staff appreciate the refinements made to the data compared to last year's. However, we also maintain that further refinements in methodology are needed in analyzing diagnostic groups and case mix. Measures of severity and comorbid conditions are required to represent medical care more accurately. The increase in ambulatory health care delivery will most likely result in hospitalized patients having increasingly greater illness severity which will significantly impact future data. Adjustments in severity are desperately needed.

In reviewing our own data additional cases have been identified which affect our mortality rates. Attached for your review are our re-calculated mortalities. Additional comments and observatons relative to specific diagnostic groups have been forwarded to your agency in a separate correspondence.

Thank you for the opportunity to respond to your statistics.

Sincerely,

Kevin Wardell

Kevin Wardell
Executive Vice President and Chief Operating Officer

Walter Hollinger MD

Walter Hollinger, M.D.
Chairman Utilization Review Committee

KW/WH:cjg

LUTHERAN HOSPITAL

501 10TH AVE
MOLINE, IL 61265

Medicare Hospital Provider Number: 140123

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,712	16	11 - 16	1,718	18	13 - 18
Cancer	115	63	33 - 55	124	61	37 - 59
Cerebrovascular Accidents	62	34	16 - 40	51	33	16 - 43
Gastrointestinal Catastrophes	6	17	8 - 70	11	36	14 - 68
Infectious Disease	23	22	18 - 55	40	30	22 - 54
Metabolic/Electrolyte Disorders	31	32	15 - 52	20	45	10 - 55
Pulmonary Disease	104	27	17 - 37	124	35	17 - 37
Renal Failure	9	56	19 - 83	8	50	19 - 87
Severe Acute Heart Disease	57	32	24 - 50	58	28	27 - 52
Severe Chronic Heart Disease	72	31	15 - 37	85	28	15 - 36
Severe Trauma	2	50	1 - 93	1	100	1 - 97
Gastrointestinal Disease	122	4	1 - 11	112	5	1 - 13
Gynecologic Disease	23	0	0 - 99	12	0	0 -100
Low-Risk Heart Disease	210	2	1 - 7	172	1	1 - 6
Musculoskeletal/Skin Conditions	180	3	1 - 8	160	4	0 - 10
Neuropsychiatric/Sensory Disease	39	0	1 - 14	28	4	1 - 29
Urologic Disease	49	4	0 - 37	48	6	0 - 26

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	200
Occupancy Rate (%):	52
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	101
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	166
Licensed Practical Nurses:	18

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Lutheran Hospital
501 Tenth Avenue
Moline, Illinois 61265
309/757-2611

Kenneth D. Moburg, President

#140123

October 24, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

This is a response to your letter and information dated September 15, 1988. After review and analysis of the information, I would like to provide you with the following response. This information is provided in the hope of clarifying the mortality rates in your document and recognizing that you will be sharing these comments in addition to your information with the community.

In review of the information, the data seems to be reasonably accurate. To the extent the model has been presented to date, the analysis seems to be appropriate. Of course, any attempt to directly correlate this data with the ability of the hospital to provide quality health care to its patients would not appear to be based on any fact. In review of the overall mortality rate at Lutheran Hospital as compared to the predicted rate, it is noted that overall mortality is at the upper end of the prediction. The obvious reason for this is due to the higher-than-predicted values for cancer deaths. Again, as in last year's data, the higher-than-predicted cancer deaths are due to the hospice program at Lutheran Hospital. As was the case last year, a vast majority of the cancer deaths are people in the hospice program. The hospice program is designed for those who have been diagnosed with a terminal illness and are expected to die within six months. The hospice program at Lutheran Hospital is used by the community, including additional hospitals. If there were to be any kind of comparison in this area, it would be necessary to exclude the hospice patients from the mortality statistics. It does not seem, however, that the model has the capability of taking this into account. I believe in last year's information this was highlighted by the fact that the institution which had the highest mortality rate by the process was determined to be a hospice, which took care only of the terminally ill. Lutheran Hospital provides a quality hospice program and believes that the community will understand the effect of this program on these mortality rates.

As can be seen by the rest of the mortalities in the different diagnostic categories, there is nothing of significant note to mention.

Thank you for the ability to respond to this information. It is hoped that the future will see more and more meaningful data for the community to use in its review of health care delivery.

Sincerely,

Kenneth D. Moburg
President

RLG:klp

LUTHERN GENERAL HOSPITAL

1775 DEMPSTER STREET
PARK RIDGE , IL 60068

Medicare Hospital Provider Number: 140223

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,083	13	11 - 15	4,007	13	12 - 16
Cancer	157	31	30 - 50	159	41	31 - 52
Cerebrovascular Accidents	172	22	19 - 33	169	30	19 - 35
Gastrointestinal Catastrophes	43	40	21 - 54	36	33	21 - 56
Infectious Disease	89	51	27 - 52	58	43	26 - 55
Metabolic/Electrolyte Disorders	56	20	14 - 42	47	13	10 - 37
Pulmonary Disease	269	32	23 - 39	260	36	22 - 38
Renal Failure	14	71	16 - 73	19	37	14 - 70
Severe Acute Heart Disease	177	36	31 - 49	199	39	32 - 48
Severe Chronic Heart Disease	194	22	17 - 30	194	20	18 - 31
Severe Trauma	15	7	14 - 51	7	14	8 - 67
Gastrointestinal Disease	273	2	1 - 6	243	2	1 - 6
Gynecologic Disease	21	0	0 -100	21	0	0 - 99
Low-Risk Heart Disease	532	4	2 - 6	447	3	2 - 6
Musculoskeletal/Skin Conditions	379	1	1 - 5	401	2	1 - 5
Neuropsychiatric/Sensory Disease	155	1	1 - 6	150	1	1 - 7
Urologic Disease	145	3	0 - 11	143	3	1 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	664
Ownership/Control:	Church

STAFFING

Interns and Residents:	115
Registered Nurses:	725
Licensed Practical Nurses:	54

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MACNEAL MEMORIAL HOSPITAL

3231 SOUTH EUCLID AVENUE
BERWYN, IL 60402

Medicare Hospital Provider Number: 140054

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,828	14	11 - 15	2,726	15	11 - 16
Cancer	97	45	28 - 52	93	35	27 - 51
Cerebrovascular Accidents	141	30	18 - 35	160	29	18 - 34
Gastrointestinal Catastrophes	38	42	24 - 59	29	38	17 - 55
Infectious Disease	42	36	22 - 54	41	22	22 - 52
Metabolic/Electrolyte Disorders	41	22	8 - 40	44	18	10 - 39
Pulmonary Disease	166	31	17 - 35	151	27	20 - 38
Renal Failure	12	25	13 - 71	16	31	20 - 76
Severe Acute Heart Disease	163	44	29 - 47	168	42	30 - 48
Severe Chronic Heart Disease	129	24	16 - 32	134	21	16 - 32
Severe Trauma	6	50	9 - 77	13	62	11 - 64
Gastrointestinal Disease	197	3	1 - 8	183	3	1 - 8
Gynecologic Disease	17	0	0 -100	21	0	0 -100
Low-Risk Heart Disease	309	3	1 - 6	289	5	1 - 8
Musculoskeletal/Skin Conditions	279	3	1 - 7	274	5	1 - 8
Neuropsychiatric/Sensory Disease	53	2	1 - 16	54	6	0 - 37
Urologic Disease	163	3	0 - 13	134	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	427
Occupancy Rate (%):	52
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	193
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	49
Registered Nurses:	310
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MACNEAL
Hospital

3249 South Oak Park Ave.
Berwyn, Illinois 60402
(312) 795-9100

140054

HCFA REPORT RESPONSE
MACNEAL HOSPITAL
BERWYN, ILLINOIS
10/24/88

MacNeal Hospital is located in one of the oldest communities in the nation, with twice the aged population of the average American community. This makes MacNeal a major provider of hospital care to patients over 65 years old in the greater Chicago area.

In 1988, there are again no surprises in the HCFA data release, which shows that MacNeal mortality rates fall within the predicted ranges. This year's figures, in fact, show that MacNeal's actual mortality rate is one percent lower than last year and at the midpoint of a narrower predicted range.

The statistical model HCFA used for this release offers a better reflection of the influence of age on expected mortality rates than did its previous model, addressing one of our concerns with last year's release. These improvements made in the HCFA model this year provide narrower predictive ranges, therefore offering greater certainty that falling in the range accurately reflects performance predicted by the model.

MacNeal physicians regularly contribute their time to quality assurance review activities. As a 427-bed community teaching hospital with a 13-year old formal program of medical quality assurance, MacNeal is actively engaged in constant scrutiny of its medical care in search of opportunities for improvement. MacNeal welcomes the information HCFA provides as an additional tool for use by its quality assurance program.

MacNeal has reviewed its mortality cases for many years. For some time, MacNeal has also looked at other outcome measures, such as length of stay, morbidity, infections, transfusion reactions, and hospital re-admissions on a severity-adjusted basis.

The MacNeal quality assurance program reviews not only care provided by physicians, but also studies in a careful and systematic way the services provided by its ancillary staff. The Hospital maintains a continuous exchange of information with its providers in a mutual effort to continually monitor quality of care. As a result of this review, MacNeal continually takes steps to maintain and improve the excellent care of which it is justifiably proud.

Although MacNeal still sees valid criticisms of HCFA's methodology in preparing the report, it supports the government's continuing efforts to seek to provide information which can aid hospital quality assurance programs. It is a mistake to suggest, as some have done, that this mortality data release can be used in a meaningful way by payors, purchasers or consumers in selecting high quality providers of health care.

MacNeal agrees with the HCFA statement that mortality rates provide useful information but do not indicate quality of care for any individual hospital. MacNeal also agrees with the AHA and JCAHO that release of this information is not necessarily constructive, nor does it address the excellence of medical care delivered at this and many other fine hospitals.

MARION MEMORIAL HOSPITAL

917 W MAIN
MARION , IL 62959

Medicare Hospital Provider Number: 140184

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,134	13	11 - 16	1,142	12	10 - 15
Cancer	21	52	26 - 68	24	46	27 - 67
Cerebrovascular Accidents	41	44	17 - 47	36	33	16 - 47
Gastrointestinal Catastrophes	3	33	4 - 86	5	60	14 - 85
Infectious Disease	17	24	22 - 64	8	50	14 - 75
Metabolic/Electrolyte Disorders	23	26	11 - 50	28	21	11 - 46
Pulmonary Disease	72	24	19 - 41	88	22	16 - 37
Renal Failure	1	100	0 -100	2	100	5 - 90
Severe Acute Heart Disease	58	52	26 - 53	33	42	26 - 60
Severe Chronic Heart Disease	70	24	13 - 35	67	31	15 - 38
Severe Trauma	2	50	1 - 93	1	0	0 - 99
Gastrointestinal Disease	118	3	1 - 9	112	2	1 - 9
Gynecologic Disease	12	0	0 - 79	10	0	0 -100
Low-Risk Heart Disease	140	3	1 - 8	143	3	1 - 8
Musculoskeletal/Skin Conditions	109	2	1 - 9	117	3	0 - 11
Neuropsychiatric/Sensory Disease	30	3	0 - 39	61	0	0 - 11
Urologic Disease	27	4	0 - 60	27	7	0 - 85

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	110
Occupancy Rate (%):	60
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	28
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	0
Registered Nurses:	62
Licensed Practical Nurses:	43

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MARSHALL BROWNING HOSPITAL

900 N WASHINGTON
DU QUOIN, IL 62832

Medicare Hospital Provider Number: 140037

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	352	20	12 - 21	364	17	10 - 19
Cancer	14	86	32 - 73	7	71	12 - 73
Cerebrovascular Accidents	18	22	14 - 53	18	39	15 - 59
Gastrointestinal Catastrophes	1	0	0 - 98	1	100	2 - 97
Infectious Disease	3	0	10 - 83	3	0	2 - 80
Metabolic/Electrolyte Disorders	7	14	10 - 67	4	50	4 - 82
Pulmonary Disease	37	41	17 - 50	42	12	13 - 36
Renal Failure	0	-	-	4	75	12 - 88
Severe Acute Heart Disease	15	60	22 - 69	24	50	21 - 60
Severe Chronic Heart Disease	32	53	11 - 45	19	53	12 - 55
Severe Trauma	2	50	4 - 92	1	0	1 - 97
Gastrointestinal Disease	39	0	0 - 19	47	0	1 - 11
Gynecologic Disease	9	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	43	2	0 - 20	44	9	0 - 34
Musculoskeletal/Skin Conditions	26	0	0 - 65	27	0	0 - 30
Neuropsychiatric/Sensory Disease	4	0	0 - 98	9	0	0 -100
Urologic Disease	7	0	0 -100	7	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	60
Occupancy Rate (%):	32
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	19
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	20
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MARTHA WASHINGTON HOSPITAL

4055 N WESTERN AVENUE
CHICAGO , IL 60618

Medicare Hospital Provider Number: 140072

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	968	11	9 - 14	983	8	9 - 14
Cancer	26	46	26 - 64	18	44	21 - 66
Cerebrovascular Accidents	36	28	11 - 42	42	21	15 - 41
Gastrointestinal Catastrophes	8	63	5 - 69	14	21	9 - 56
Infectious Disease	16	19	15 - 57	18	17	21 - 59
Metabolic/Electrolyte Disorders	22	27	5 - 48	19	16	5 - 45
Pulmonary Disease	44	25	14 - 42	71	18	18 - 39
Renal Failure	1	0	2 - 97	1	0	1 - 97
Severe Acute Heart Disease	33	39	23 - 57	27	30	25 - 60
Severe Chronic Heart Disease	70	24	14 - 36	65	9	17 - 34
Severe Trauma	1	0	0 - 97	1	0	0 - 99
Gastrointestinal Disease	70	6	1 - 18	72	3	1 - 13
Gynecologic Disease	6	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	106	1	1 - 7	116	1	2 - 8
Musculoskeletal/Skin Conditions	125	2	1 - 9	131	3	1 - 9
Neuropsychiatric/Sensory Disease	81	0	0 - 10	58	2	0 - 48
Urologic Disease	36	3	0 - 57	30	3	0 - 46

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	210
Occupancy Rate (%):	52
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	80
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	141
Licensed Practical Nurses:	16

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MARY THOMPSON HOSPITAL

140 N ASHLAND AVENUE
CHICAGO, IL 60607

Medicare Hospital Provider Number: 140261

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	445	11	12 - 18	431	15	11 - 18
Cancer	17	29	23 - 66	17	53	28 - 73
Cerebrovascular Accidents	7	14	3 - 64	15	47	14 - 62
Gastrointestinal Catastrophes	2	0	2 - 89	1	0	0 - 99
Infectious Disease	10	40	18 - 74	13	38	15 - 66
Metabolic/Electrolyte Disorders	16	19	9 - 52	8	13	7 - 61
Pulmonary Disease	17	18	20 - 58	15	20	11 - 53
Renal Failure	9	11	13 - 70	6	67	14 - 84
Severe Acute Heart Disease	13	38	21 - 71	4	75	16 - 89
Severe Chronic Heart Disease	31	19	15 - 44	26	27	13 - 47
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	36	0	1 - 15	33	3	0 - 28
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	61	7	0 - 23	62	0	1 - 9
Musculoskeletal/Skin Conditions	27	0	1 - 20	25	0	0 - 61
Neuropsychiatric/Sensory Disease	8	0	0 - 89	6	0	0 -100
Urologic Disease	17	0	0 -100	11	9	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	203
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	75
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MASON DISTRICT HOSPITAL

520 EAST FRANKLIN STREET
HAVANA, IL 62644

Medicare Hospital Provider Number: 140112

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	277	16	10 - 20	344	13	10 - 18
Cancer	10	60	22 - 77	9	56	20 - 78
Cerebrovascular Accidents	8	63	11 - 71	9	0	9 - 47
Gastrointestinal Catastrophes	1	0	1 - 97	1	100	3 - 98
Infectious Disease	6	17	8 - 70	10	10	23 - 68
Metabolic/Electrolyte Disorders	6	17	5 - 69	6	33	6 - 74
Pulmonary Disease	19	42	11 - 54	21	24	19 - 57
Renal Failure	1	0	0 -100	2	50	5 - 94
Severe Acute Heart Disease	9	44	18 - 76	11	64	16 - 69
Severe Chronic Heart Disease	16	25	8 - 51	17	24	7 - 49
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	25	0	0 - 39	24	4	1 - 33
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	30	3	1 - 24	34	9	1 - 33
Musculoskeletal/Skin Conditions	13	0	1 - 41	33	0	0 - 22
Neuropsychiatric/Sensory Disease	2	50	1 - 94	10	0	0 - 80
Urologic Disease	11	9	0 -100	15	7	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	36
Occupancy Rate (%):	39
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	9
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	0
Registered Nurses:	24
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MASSAC MEMORIAL HOSPITAL

MEMORIAL HEIGHTS
METROPOLIS, IL 62960

Medicare Hospital Provider Number: 140042

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	585	13	10 - 17	588	15	11 - 18
Cancer	6	33	15 - 81	8	100	34 - 75
Cerebrovascular Accidents	12	50	8 - 61	16	19	18 - 57
Gastrointestinal Catastrophes	4	50	11 - 87	2	50	3 - 92
Infectious Disease	5	60	11 - 82	9	67	17 - 74
Metabolic/Electrolyte Disorders	13	8	8 - 48	15	20	6 - 52
Pulmonary Disease	47	32	22 - 50	60	33	17 - 43
Renal Failure	2	100	6 - 91	1	0	1 - 97
Severe Acute Heart Disease	29	41	27 - 62	36	28	28 - 58
Severe Chronic Heart Disease	40	25	12 - 40	40	15	11 - 36
Severe Trauma	0	-	-	2	100	2 - 89
Gastrointestinal Disease	47	2	1 - 18	56	4	0 - 21
Gynecologic Disease	6	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	118	1	2 - 7	110	4	1 - 10
Musculoskeletal/Skin Conditions	45	4	0 - 27	42	5	0 - 29
Neuropsychiatric/Sensory Disease	17	0	0 - 38	14	0	0 - 89
Urologic Disease	25	12	0 - 65	12	8	0 - 62

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	57
Occupancy Rate (%):	60
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MCDONOUGH CO DISTRICT HOSPITAL

525 EAST GRANT STREET
MACOMB, IL 61455

Medicare Hospital Provider Number: 140089

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,384	10	9 - 13	1,383	11	9 - 13
Cancer	39	56	28 - 61	34	56	30 - 65
Cerebrovascular Accidents	57	19	19 - 41	48	44	16 - 45
Gastrointestinal Catastrophes	7	0	18 - 64	6	50	5 - 75
Infectious Disease	7	29	11 - 73	17	29	18 - 63
Metabolic/Electrolyte Disorders	16	19	10 - 53	14	29	4 - 56
Pulmonary Disease	69	19	18 - 39	79	22	16 - 37
Renal Failure	7	43	13 - 81	4	75	14 - 90
Severe Acute Heart Disease	31	35	24 - 58	40	35	24 - 54
Severe Chronic Heart Disease	54	19	13 - 35	60	22	17 - 40
Severe Trauma	1	0	1 - 97	1	100	0 - 97
Gastrointestinal Disease	120	6	1 - 12	109	4	1 - 11
Gynecologic Disease	15	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	171	4	2 - 8	123	4	1 - 10
Musculoskeletal/Skin Conditions	190	2	1 - 7	208	3	1 - 7
Neuropsychiatric/Sensory Disease	60	7	0 - 25	110	2	0 - 10
Urologic Disease	46	2	0 - 49	53	4	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	155
Occupancy Rate (%):	50
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	39
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	0
Registered Nurses:	88
Licensed Practical Nurses:	30

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MEMORIAL HOSPITAL

SOUTH ADAMS STREET
CARTHAGE, IL 62321

Medicare Hospital Provider Number: 140081

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	294	13	10 - 18	379	13	10 - 17
Cancer	7	71	17 - 78	9	44	18 - 76
Cerebrovascular Accidents	17	53	12 - 57	9	33	7 - 65
Gastrointestinal Catastrophes	2	50	5 - 93	2	100	4 - 89
Infectious Disease	6	33	14 - 80	5	20	10 - 77
Metabolic/Electrolyte Disorders	1	100	2 - 97	3	0	4 - 79
Pulmonary Disease	26	27	7 - 43	56	16	14 - 37
Renal Failure	3	67	9 - 91	0	-	-
Severe Acute Heart Disease	14	29	17 - 63	24	46	20 - 59
Severe Chronic Heart Disease	17	12	10 - 45	14	43	10 - 59
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	31	3	0 - 37	33	6	0 - 33
Gynecologic Disease	7	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	42	0	1 - 13	27	4	0 - 49
Musculoskeletal/Skin Conditions	22	0	1 - 24	49	6	0 - 35
Neuropsychiatric/Sensory Disease	3	0	0 -100	11	0	0 - 95
Urologic Disease	9	0	0 -100	7	14	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	67
Occupancy Rate (%):	31
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	6
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	24
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MEMORIAL HOSPITAL

404 W MAIN
CARBONDALE, IL 62901

Medicare Hospital Provider Number: 140164

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,128	14	10 - 15	1,081	13	10 - 15
Cancer	34	62	30 - 64	42	45	25 - 57
Cerebrovascular Accidents	27	22	15 - 48	26	19	15 - 47
Gastrointestinal Catastrophes	12	33	10 - 62	9	33	16 - 73
Infectious Disease	21	33	23 - 64	14	29	18 - 66
Metabolic/Electrolyte Disorders	20	40	13 - 57	18	22	9 - 51
Pulmonary Disease	41	44	14 - 46	42	36	13 - 44
Renal Failure	22	18	16 - 66	7	0	11 - 67
Severe Acute Heart Disease	37	54	24 - 57	44	41	23 - 53
Severe Chronic Heart Disease	39	21	16 - 43	40	13	13 - 36
Severe Trauma	1	0	0 - 99	2	0	0 - 98
Gastrointestinal Disease	73	4	1 - 15	74	5	0 - 19
Gynecologic Disease	19	0	0 -100	20	0	0 -100
Low-Risk Heart Disease	105	6	1 - 14	96	3	1 - 11
Musculoskeletal/Skin Conditions	107	1	1 - 7	99	3	1 - 11
Neuropsychiatric/Sensory Disease	50	0	0 - 13	34	3	0 - 30
Urologic Disease	56	0	0 - 11	50	2	0 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	151
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	70
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	12
Registered Nurses:	174
Licensed Practical Nurses:	48

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MEMORIAL HOSPITAL

4501 N PARK DR
BELLEVILLE, IL 62223

Medicare Hospital Provider Number: 140185

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,108	12	9 - 13	2,909	11	10 - 14
Cancer	106	45	28 - 51	100	35	30 - 53
Cerebrovascular Accidents	100	36	18 - 38	108	25	21 - 39
Gastrointestinal Catastrophes	20	30	16 - 58	16	38	15 - 62
Infectious Disease	64	36	22 - 50	55	33	21 - 51
Metabolic/Electrolyte Disorders	39	31	10 - 44	36	33	12 - 47
Pulmonary Disease	124	23	18 - 36	122	22	17 - 35
Renal Failure	7	29	9 - 76	11	64	17 - 79
Severe Acute Heart Disease	102	44	30 - 51	103	34	30 - 51
Severe Chronic Heart Disease	196	23	15 - 29	184	27	18 - 33
Severe Trauma	7	0	10 - 57	4	25	2 - 82
Gastrointestinal Disease	221	4	1 - 8	196	3	1 - 8
Gynecologic Disease	29	0	0 - 87	20	0	0 - 97
Low-Risk Heart Disease	417	5	2 - 7	402	2	2 - 6
Musculoskeletal/Skin Conditions	394	2	1 - 5	348	1	1 - 5
Neuropsychiatric/Sensory Disease	162	4	0 - 11	159	1	0 - 6
Urologic Disease	97	6	0 - 17	93	4	1 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	499
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	163
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	5
Registered Nurses:	296
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MEMORIAL HOSPITAL

1900 STATE ST
CHESTER, IL 62233

Medicare Hospital Provider Number: 140245

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	438	13	9 - 16	521	14	8 - 15
Cancer	13	69	21 - 69	18	50	24 - 69
Cerebrovascular Accidents	19	21	9 - 48	24	29	13 - 50
Gastrointestinal Catastrophes	5	60	10 - 81	0	-	-
Infectious Disease	2	50	2 - 92	4	50	9 - 85
Metabolic/Electrolyte Disorders	8	13	10 - 63	1	0	1 - 97
Pulmonary Disease	32	19	11 - 41	27	30	14 - 49
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	16	19	23 - 62	23	48	21 - 61
Severe Chronic Heart Disease	36	36	11 - 42	28	36	9 - 45
Severe Trauma	1	100	1 - 97	0	-	-
Gastrointestinal Disease	47	2	1 - 17	51	4	0 - 23
Gynecologic Disease	3	0	0 -100	3	33	0 -100
Low-Risk Heart Disease	43	2	0 - 22	72	6	0 - 19
Musculoskeletal/Skin Conditions	43	0	1 - 12	52	0	0 - 13
Neuropsychiatric/Sensory Disease	21	0	0 - 57	30	3	0 - 81
Urologic Disease	22	5	0 - 98	30	3	1 - 25

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	76
Occupancy Rate (%):	43
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	18
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	0
Registered Nurses:	24
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MEMORIAL HOSPITAL FOR MCHENRY COUNTY

527 WEST SOUTH STREET
WOODSTOCK, IL 60098

Medicare Hospital Provider Number: 140176

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	867	11	9 - 14	878	12	9 - 15
Cancer	29	48	23 - 61	28	50	21 - 59
Cerebrovascular Accidents	33	24	14 - 44	40	20	14 - 41
Gastrointestinal Catastrophes	8	38	7 - 69	6	67	13 - 79
Infectious Disease	14	36	19 - 68	12	42	15 - 67
Metabolic/Electrolyte Disorders	13	38	5 - 59	21	5	4 - 36
Pulmonary Disease	53	34	15 - 43	51	24	13 - 39
Renal Failure	1	0	1 - 97	5	40	9 - 83
Severe Acute Heart Disease	28	39	25 - 61	35	49	24 - 57
Severe Chronic Heart Disease	54	20	14 - 36	52	27	13 - 38
Severe Trauma	0	-	-	1	0	2 - 97
Gastrointestinal Disease	75	4	1 - 15	69	0	1 - 8
Gynecologic Disease	7	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	91	2	1 - 10	77	5	1 - 16
Musculoskeletal/Skin Conditions	90	3	0 - 14	88	3	1 - 13
Neuropsychiatric/Sensory Disease	76	3	0 - 39	92	0	0 - 10
Urologic Disease	35	0	0 - 41	30	7	0 - 88

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	125
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	64
Percent of Physicians Who Are Board Certified Specialists:	84
Interns and Residents:	0
Registered Nurses:	118
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MEMORIAL MEDICAL CENTER

800 N RUTLEDGE
SPRINGFIELD , IL 62781

Medicare Hospital Provider Number: 140148

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,501	10	9 - 13	4,181	10	9 - 13
Cancer	182	34	30 - 49	180	36	32 - 52
Cerebrovascular Accidents	139	25	20 - 36	113	21	20 - 37
Gastrointestinal Catastrophes	41	34	19 - 52	20	35	12 - 56
Infectious Disease	42	33	24 - 55	34	38	20 - 56
Metabolic/Electrolyte Disorders	38	18	12 - 42	37	24	10 - 43
Pulmonary Disease	180	19	18 - 33	139	20	20 - 37
Renal Failure	36	22	13 - 61	39	26	14 - 63
Severe Acute Heart Disease	120	44	31 - 52	100	43	28 - 49
Severe Chronic Heart Disease	155	25	17 - 32	167	31	17 - 33
Severe Trauma	9	44	5 - 67	12	50	9 - 65
Gastrointestinal Disease	335	2	1 - 6	267	4	1 - 7
Gynecologic Disease	48	0	0 -100	47	0	0 -100
Low-Risk Heart Disease	615	4	2 - 6	557	4	2 - 6
Musculoskeletal/Skin Conditions	465	3	1 - 5	466	3	1 - 6
Neuropsychiatric/Sensory Disease	164	4	1 - 9	167	1	1 - 6
Urologic Disease	230	1	1 - 5	216	3	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	566
Occupancy Rate (%):	76
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	424
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	0
Registered Nurses:	595
Licensed Practical Nurses:	85

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

Memorial Medical Center

VHA
Member of the Voluntary Hospitals of America System

PROVIDER NUMBER - 140148

COMMENTS ON HCFA MORTALITY RATES

HCFA is to be applauded for continuing to lead the effort to educate the public about quality health care.

The current model HCFA has developed to predict mortality is a slight improvement over last year, but it still has flaws and offers only limited usefulness as an indicator of quality We encourage the effort, though, as a step in the right direction.

As a predictor of mortality rates, the HCFA model is one of the best currently available. We believe it is not possible, however, to interpret the data as a stand-alone measure of quality. The public must understand this!

For Memorial Medical Center, all actual mortality rates fall within predicted ranges. This does not, however, necessarily reflect the quality of care provided, but in fact, may be due to the severity of illness of the patient's treated or a result of random variations of analyzing small numbers in a particular sample.

There is a risk that the public will draw erroneous conclusions about quality of care based on this data. It is possible that actual mortality in any category may be more indicative of severity of illness, random variation or other factors not accounted for in the model.

The more relevant question which should be asked is: Does the actual experience mean high-quality care was provided to severely-ill patients or was routine care provided to patients who were not as ill? Either question is appropriate but cannot be answered by data in the HCFA study.

The range of predicted mortality, while very large in certain categories, does not represent a range of higher to lower quality. It does represent a range which attempts to account for variations within the population analyzed. Factors such as age, sex, complications and prior hospitalization vary tremendously among our patients and have significant effects on predicted mortality ranges.

Similarly, although actual experience falls within a predicted range, it is not possible to say whether quality, severity of illness or other factors determined final placement in the range.

Memorial Medical Center is a 566-bed hospital serving a broad geographic region in central and southern Illinois. As a teaching institution involved in research and education, Memorial Medical Center provides a full range of health care services to a broad spectrum of patients. Many of our patients are acutely ill. While we would like to represent the HCFA study as proof of the high quality of care we provide to our patients, we do not believe we can do so based on this data.

Memorial Medical Center, like most hospitals, is working to develop aggressive quality control and peer review programs. To monitor and evaluate quality of care issues across a broad range of factors has been, and will remain, a top priority of our hospital.

HCFA is to be applauded for its efforts, but additional indicators must accompany mortality rates to assure a complete and effective measure of quality. Efforts are underway by many organizations to measure quality more comprehensively. These efforts should be supported and encouraged.

The information provided to Memorial Medical Center by HCFA on hospital characteristics was based on 1986 AHA survey data. HCFA has indicated that 1987 data will be released to the public. The information provided below is the 1987 information provided to AHA in the exact format that HCFA provided to Memorial Medical Center using 1986 information.

----------HOSPITAL CHARACTERISTICS----------

Survey and Year 1987

Beds (#):	566
Occupancy Rate (%):	76%
Ownership/Control:	Private Non Profit

Staffing:

Total Number of Physicians:	424
Percent of Physicians Who Are Board Certified Specialists:	72%
Interns and Residents Per Bed:	.30*
Registered Nurses Per Bed:	1.06
Licensed Practical Nurses Per Bed	.15

Speciality Services:

Shock/Trauma or Burn Unit:	Yes
Coronary Care Unit:	Yes
Organ Transplant Services:	Yes
Hospice Care:	Yes

*Not reported in 1987 AHA survey - Figure = 164 residents with MMC affiliate with SIU School of Medicine of February 1987.

MENDOTA COMM HOSP

MEMORIAL DR
MENDOTA, IL 61342

Medicare Hospital Provider Number: 140025

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	518	14	9 - 16	480	11	10 - 16
Cancer	15	47	22 - 70	13	62	22 - 73
Cerebrovascular Accidents	24	25	11 - 47	21	19	10 - 46
Gastrointestinal Catastrophes	6	50	5 - 75	3	33	5 - 87
Infectious Disease	6	33	8 - 75	7	14	20 - 76
Metabolic/Electrolyte Disorders	7	29	6 - 70	9	22	6 - 63
Pulmonary Disease	37	22	12 - 41	28	14	12 - 41
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	23	39	22 - 61	27	37	29 - 65
Severe Chronic Heart Disease	35	23	11 - 40	30	23	8 - 40
Severe Trauma	0	-	-	2	0	0 - 92
Gastrointestinal Disease	63	3	0 - 18	42	2	1 - 19
Gynecologic Disease	17	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	49	4	0 - 23	58	0	1 - 9
Musculoskeletal/Skin Conditions	43	0	0 - 16	41	0	0 - 17
Neuropsychiatric/Sensory Disease	10	10	0 -100	16	0	0 - 98
Urologic Disease	15	0	0 - 93	16	6	0 - 96

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	72
Occupancy Rate (%):	39
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	11
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	46
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MENNONITE HOSP

807 N MAIN ST
BLOOMINGTON, IL 61701

Medicare Hospital Provider Number: 140104

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,051	11	10 - 15	1,227	11	9 - 14
Cancer	59	51	35 - 64	55	53	38 - 67
Cerebrovascular Accidents	24	33	13 - 50	32	34	14 - 47
Gastrointestinal Catastrophes	14	29	7 - 57	14	14	11 - 54
Infectious Disease	12	25	16 - 65	5	40	16 - 87
Metabolic/Electrolyte Disorders	14	0	8 - 39	24	17	8 - 44
Pulmonary Disease	43	26	14 - 42	51	22	15 - 40
Renal Failure	5	40	6 - 81	4	0	13 - 82
Severe Acute Heart Disease	24	46	24 - 63	43	37	28 - 57
Severe Chronic Heart Disease	59	15	16 - 36	44	20	15 - 40
Severe Trauma	1	0	1 - 97	0	-	-
Gastrointestinal Disease	61	0	1 - 9	111	5	1 - 13
Gynecologic Disease	9	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	107	1	1 - 7	98	1	1 - 8
Musculoskeletal/Skin Conditions	150	3	0 - 10	163	1	1 - 6
Neuropsychiatric/Sensory Disease	75	1	0 - 16	139	0	0 - 5
Urologic Disease	40	2	0 - 86	44	0	0 - 53

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	248
Ownership/Control:	Church

STAFFING

Interns and Residents:	0
Registered Nurses:	112
Licensed Practical Nurses:	33

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MERCER COUNTY HOSPITAL

409 NW NINTH AVE
ALEDO, IL 61231

Medicare Hospital Provider Number: 140218

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	305	13	9 - 17	330	8	8 - 15
Cancer	3	100	21 - 96	4	25	12 - 86
Cerebrovascular Accidents	12	42	11 - 63	7	14	7 - 64
Gastrointestinal Catastrophes	1	100	0 - 97	2	50	0 - 94
Infectious Disease	2	50	0 - 96	3	33	10 - 90
Metabolic/Electrolyte Disorders	8	38	6 - 68	6	0	4 - 59
Pulmonary Disease	17	12	13 - 48	18	17	9 - 47
Renal Failure	1	0	0 - 98	0	-	-
Severe Acute Heart Disease	11	36	15 - 68	17	35	20 - 64
Severe Chronic Heart Disease	36	19	14 - 41	30	20	12 - 42
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	32	9	0 - 69	36	6	1 - 27
Gynecologic Disease	1	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	61	3	1 - 16	59	2	1 - 13
Musculoskeletal/Skin Conditions	12	17	0 -100	32	6	0 - 62
Neuropsychiatric/Sensory Disease	3	0	0 -100	11	9	0 - 95
Urologic Disease	6	0	0 -100	21	0	0 - 39

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	53
Occupancy Rate (%):	28
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	8
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	34
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MERCY CENTER FOR HEALTH CARE SERVICE

1325 N HIGHLAND AVENUE
AURORA, IL 60506

Medicare Hospital Provider Number: 140174

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,198	13	9 - 14	1,185	13	8 - 14
Cancer	30	47	21 - 58	34	50	27 - 62
Cerebrovascular Accidents	49	22	18 - 42	47	28	18 - 45
Gastrointestinal Catastrophes	8	63	11 - 72	7	29	9 - 71
Infectious Disease	14	50	12 - 62	15	67	13 - 61
Metabolic/Electrolyte Disorders	12	17	6 - 55	20	20	10 - 50
Pulmonary Disease	58	29	17 - 42	54	33	13 - 40
Renal Failure	5	20	7 - 79	6	67	11 - 82
Severe Acute Heart Disease	66	48	24 - 50	36	42	22 - 55
Severe Chronic Heart Disease	69	26	12 - 34	63	27	10 - 33
Severe Trauma	0	-	-	4	50	3 - 82
Gastrointestinal Disease	77	0	0 - 8	72	6	0 - 23
Gynecologic Disease	14	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	107	3	1 - 10	127	4	1 - 10
Musculoskeletal/Skin Conditions	140	2	0 - 9	156	2	0 - 9
Neuropsychiatric/Sensory Disease	32	6	0 - 70	30	3	0 - 66
Urologic Disease	47	4	0 - 73	41	0	0 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	318
Occupancy Rate (%):	58
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	178
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	217
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MERCY HOSP MED CENTER

STEVENSON EXPRESSWAY KING DR
CHICAGO, IL 60616

Medicare Hospital Provider Number: 140158

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,623	12	11 - 15	2,718	13	11 - 15
Cancer	87	43	31 - 55	98	37	30 - 53
Cerebrovascular Accidents	124	23	17 - 34	109	22	18 - 35
Gastrointestinal Catastrophes	28	25	16 - 52	25	52	19 - 60
Infectious Disease	36	47	24 - 59	34	59	24 - 60
Metabolic/Electrolyte Disorders	59	36	16 - 46	75	29	17 - 44
Pulmonary Disease	87	29	18 - 40	100	31	17 - 38
Renal Failure	14	36	13 - 71	12	25	16 - 74
Severe Acute Heart Disease	107	30	28 - 48	95	35	31 - 52
Severe Chronic Heart Disease	178	21	16 - 29	165	19	15 - 29
Severe Trauma	3	0	2 - 80	3	0	2 - 80
Gastrointestinal Disease	157	2	2 - 8	152	4	1 - 9
Gynecologic Disease	22	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	332	5	2 - 7	333	6	1 - 8
Musculoskeletal/Skin Conditions	213	3	1 - 8	242	4	1 - 8
Neuropsychiatric/Sensory Disease	88	2	1 - 11	92	4	0 - 18
Urologic Disease	78	1	0 - 15	63	0	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	465
Occupancy Rate (%):	69
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	215
Percent of Physicians Who Are Board Certified Specialists:	80
Interns and Residents:	108
Registered Nurses:	432
Licensed Practical Nurses:	18

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Mercy Hospital and Medical Center
Stevenson Expressway at King Drive
Chicago, Illinois 60616-2477

312.567.2000

MERCY

October 17, 1988

William L. Roper, M.D.
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

ATTENTION: Mrs. Sandra Kappert

Dear Dr. Roper,

In response to the Medicare Mortality Information, I would like to make two corrections in our hospital characteristics:

1. We have the speciality service of Shock/Trauma Unit.

2. We do not provide special services for organ transplantation.

It would be appreciated to make these corrections.

Sincerely,

Sister Sheila Lyne, R.S.M.
President

:db

MERCY HOSPITAL

1400 WEST PARK AVENUE
URBANA, IL 61801

Medicare Hospital Provider Number: 140113

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,410	11	9 - 13	1,333	12	9 - 14
Cancer	63	49	29 - 57	56	52	31 - 60
Cerebrovascular Accidents	62	32	16 - 40	37	19	14 - 41
Gastrointestinal Catastrophes	10	20	12 - 64	11	36	13 - 68
Infectious Disease	12	42	11 - 64	18	33	19 - 63
Metabolic/Electrolyte Disorders	9	22	3 - 63	9	0	6 - 47
Pulmonary Disease	48	13	8 - 31	45	31	14 - 43
Renal Failure	8	38	14 - 80	5	0	6 - 71
Severe Acute Heart Disease	43	58	26 - 56	59	46	26 - 53
Severe Chronic Heart Disease	58	21	15 - 37	59	22	12 - 35
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	101	5	1 - 13	83	1	2 - 9
Gynecologic Disease	15	0	0 -100	21	0	0 -100
Low-Risk Heart Disease	201	4	2 - 8	187	4	2 - 8
Musculoskeletal/Skin Conditions	142	1	0 - 6	107	3	0 - 14
Neuropsychiatric/Sensory Disease	77	3	0 - 15	91	1	1 - 9
Urologic Disease	89	1	0 - 23	72	0	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	222
Occupancy Rate (%):	55
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	109
Percent of Physicians Who Are Board Certified Specialists:	74
Interns and Residents:	3
Registered Nurses:	169
Licensed Practical Nurses:	31

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Hospital ID: 140113



October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Thank you for the opportunity to comment on the selected mortality statistics compiled by the Health Care Financing Administration (HCFA), effecting Medicare patients treated at Mercy Hospital during 1987. As you can see, our overall percentage is well within the expected range, and in fact has actually decreased from the previous year.

Although we are pleased with this information, it is recognized that the data in its present form does contain certain limitations. In particular, HCFA's statistical model does not account for important variables such as care for the terminally ill, severity of illness measures, previous hospitalizations, transfers from other health care providers, etc. Consequently, the HCFA mortality data in and of itself, does not provide an accurate measure of quality or hospital performance.

As an example, the reported mortality rate for Severe Acute Heart Disease is more accurately explained when applying the previously mentioned variables, taking into account the patients general health and overall characteristics.

Even with the data's shortcomings, the information does provide an additional instrument for evaluation in our Hospital's ongoing quality assurance program. Mercy Hospital's internal quality review process includes a comprehensive review and assessment of each patient mortality.

When verifying the accuracy of this report, we found the data appearing in the mortality section to be correct, assuming the information on patients who expired during the 30 day post-hospitalization period is accurate. Given that 76% of the 29 reported post-hospital deaths were patients with confirmed terminal illnesses, this is quite possible. The only errors detected were in the hospital characteristics data, including bed size (222), staffing, and speciality services. We would trust that this information when published will correspond to that in Mercy Hospital's response to the 1987 American Hospital Association Survey.

Hospital ID: 140113

Mercy Hospital

Mercy Hospital recognizes that consumers have a legitimate interest and are certainly entitled to meaningful, accurate information concerning the quality of care available to them. For this, HCFA is to be commended for their efforts in enhancing consumer awareness.

We at Mercy Hospital support this effort and hope that HCFA will soon be capable of enhancing their data by incorporating severity of illness measures into their model.

Again, thank you so much for allowing us to respond and participate in this important effort.

Sincerely,

Bryon D. Pickard

Bryon D. Pickard, RRA
Administrative Director
Data Base Management

BP/rkg

cc: Illinois Hospital Association

METHODIST HOSPITAL CHICAGO

5025 N PAULINA STREET
CHICAGO, IL 60640

Medicare Hospital Provider Number: 140197

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,238	15	12 - 17	1,277	16	13 - 18
Cancer	20	25	21 - 60	23	57	27 - 68
Cerebrovascular Accidents	36	11	18 - 41	33	36	15 - 48
Gastrointestinal Catastrophes	13	31	11 - 61	17	35	14 - 60
Infectious Disease	65	48	29 - 58	76	43	30 - 58
Metabolic/Electrolyte Disorders	53	21	12 - 40	44	16	10 - 39
Pulmonary Disease	85	32	19 - 42	107	30	21 - 42
Renal Failure	8	50	14 - 81	4	50	6 - 85
Severe Acute Heart Disease	16	44	20 - 66	36	50	31 - 64
Severe Chronic Heart Disease	51	39	16 - 43	59	34	15 - 40
Severe Trauma	1	0	1 - 97	0	-	-
Gastrointestinal Disease	101	7	2 - 14	87	2	1 - 10
Gynecologic Disease	7	14	0 -100	10	0	0 -100
Low-Risk Heart Disease	129	2	2 - 8	125	4	1 - 10
Musculoskeletal/Skin Conditions	95	4	1 - 12	119	3	1 - 9
Neuropsychiatric/Sensory Disease	19	5	0 - 42	26	0	0 - 43
Urologic Disease	50	4	0 - 22	51	4	1 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	163
Occupancy Rate (%):	61
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	97
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	91
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

METHODIST MEDICAL CENTER OF ILLINOIS

221 N E GLEN OAK AVE
PEORIA, IL 61636

Medicare Hospital Provider Number: 140209

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,050	12	10 - 14	3,946	11	10 - 14
Cancer	270	43	32 - 50	251	43	34 - 52
Cerebrovascular Accidents	127	25	19 - 36	117	25	19 - 37
Gastrointestinal Catastrophes	29	34	20 - 58	26	19	17 - 52
Infectious Disease	22	50	22 - 64	23	22	18 - 56
Metabolic/Electrolyte Disorders	44	18	14 - 43	34	21	8 - 41
Pulmonary Disease	165	28	19 - 36	170	24	17 - 34
Renal Failure	15	53	17 - 75	12	58	15 - 76
Severe Acute Heart Disease	153	35	29 - 47	130	40	28 - 48
Severe Chronic Heart Disease	177	20	16 - 30	157	24	17 - 32
Severe Trauma	7	43	9 - 74	5	60	6 - 78
Gastrointestinal Disease	286	4	1 - 7	289	2	1 - 6
Gynecologic Disease	40	0	0 -100	35	0	0 -100
Low-Risk Heart Disease	599	4	2 - 6	530	4	2 - 6
Musculoskeletal/Skin Conditions	403	3	1 - 5	385	1	1 - 4
Neuropsychiatric/Sensory Disease	121	2	1 - 10	196	5	0 - 12
Urologic Disease	182	2	0 - 8	142	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	468
Occupancy Rate (%):	75
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	168
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MICHAEL REESE HOSP MEDICAL CENTER

2929 S ELLIS AVE
CHICAGO, IL 60616

Medicare Hospital Provider Number: 140075

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,525	11	12 - 16	2,875	13	11 - 16
Cancer	128	33	31 - 53	145	39	32 - 53
Cerebrovascular Accidents	144	16	20 - 34	157	23	18 - 34
Gastrointestinal Catastrophes	18	28	18 - 61	28	39	13 - 53
Infectious Disease	40	47	23 - 57	20	55	17 - 61
Metabolic/Electrolyte Disorders	60	28	17 - 46	73	26	14 - 40
Pulmonary Disease	89	31	17 - 39	106	39	22 - 44
Renal Failure	15	40	18 - 75	24	25	14 - 66
Severe Acute Heart Disease	88	31	31 - 53	94	26	29 - 49
Severe Chronic Heart Disease	137	20	18 - 33	145	20	16 - 31
Severe Trauma	10	60	6 - 65	9	0	12 - 53
Gastrointestinal Disease	149	3	1 - 8	150	1	2 - 7
Gynecologic Disease	16	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	261	2	2 - 7	273	5	2 - 8
Musculoskeletal/Skin Conditions	266	2	1 - 5	271	1	1 - 5
Neuropsychiatric/Sensory Disease	112	4	1 - 11	158	4	1 - 10
Urologic Disease	102	2	0 - 12	117	3	1 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	689
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	789
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	252
Registered Nurses:	682
Licensed Practical Nurses:	73

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Michael Reese Hospital and Medical Center

Office of the President
Lake Shore Drive at 31st Street
Chicago, Illinois 60616
(312) 791-3545

October 21, 1988

Mrs. Sandra Kappert
Health Standards & Quality Bureau
Health Care Finance Association
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21107

Dear Mrs. Kappert: Medicare # 140075

Michael Reese Hospital & Medical Center, located near the center of Chicago, is one of the largest private medical centers in the United States. It is a general and acute care hospital as well as a center of teaching and research. Its population is widely varied by socioeconomic groups, many of which require a high intensity of care.

Patient mortality is carefully monitored at Michael Reese at a number of levels, which include departmental committees, department heads, several long-standing quality assurance functions, and the administration and governing bodies of the institution. Through these mechanisms, any questions that arise about the propriety of care are immediately addressed.

Regarding the information to be released in December by the Health Care Finance Administration, we have given careful study to figures to be reported for actual and expected mortality. We have found these figures to be within ranges which present us with no substantial reason to question or reject them. Of course, the scientific validity of the statistical model used by HCFA remains subject to confirmation. This would include adjustments in the model to account for the severity of illness of patients treated at major urban centers where the complexity of illness is frequently greater.

With regard to the hospital characteristics reported, we understand this information will be selected from data submitted by the hospital to the American Hospital Association in their 1987 survey. Because HCFA will be unable to make this information available to hospitals prior to publication, Michael Reese cannot confirm its accuracy.

We continue to welcome HCFA's efforts to improve the usefulness of its reports of hospital mortality, although we recognize that mortality rate by itself is not an adequate indicator of the quality of care that hospitals provide. We would, therefore, support HCFA's efforts to refine its methodologies to more adequately measure and report quality.

Sincerely,

Henry L. Nadler, M.D.
President

MOLINE PUBLIC HOSPITAL

635 10TH AVE
MOLINE, IL 61265

Medicare Hospital Provider Number: 140204

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,087	10	9 - 14	1,120	11	9 - 14
Cancer	21	19	23 - 59	31	45	24 - 61
Cerebrovascular Accidents	43	30	14 - 42	50	30	15 - 42
Gastrointestinal Catastrophes	9	33	10 - 68	8	38	9 - 71
Infectious Disease	23	13	16 - 48	13	38	20 - 71
Metabolic/Electrolyte Disorders	12	25	6 - 58	14	29	6 - 56
Pulmonary Disease	45	16	14 - 39	46	26	16 - 43
Renal Failure	4	75	14 - 90	2	50	4 - 93
Severe Acute Heart Disease	50	40	25 - 54	48	35	27 - 55
Severe Chronic Heart Disease	53	23	12 - 36	65	25	15 - 38
Severe Trauma	3	33	5 - 86	5	40	3 - 78
Gastrointestinal Disease	88	1	1 - 9	104	3	0 - 12
Gynecologic Disease	10	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	158	2	1 - 7	145	2	2 - 8
Musculoskeletal/Skin Conditions	96	1	0 - 9	123	2	1 - 8
Neuropsychiatric/Sensory Disease	28	4	0 - 33	27	7	0 - 89
Urologic Disease	44	0	0 - 45	46	2	0 - 85

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	149
Occupancy Rate (%):	48
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	102
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Moline Public Hospital
635 Tenth Avenue/Moline, Illinois 61265/(309) 757-3131

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Sandra:

Thank you for the opportunity to review the 1987 Mortality data for Moline Public Hospital, Moline, Illinois.

Overall our analysis of the data reveals 1,087 deaths reported. Twenty (20) of the deaths were in our opinion placed in the wrong category. There were some data errors relative to age, admission-discharge dates and date of death. However, these errors did not impact the thirty (30) days discharge deadline.

When contrasting 1986 to 1987 data, the analysis reveals an overall improvement in the death rate statistics thirty (30) days post discharge. Inasmuch as the 1986 categories were adjusted to conform to 1987 categories, this conclusion appears to be justified.

Renal deaths increased by 2 (1986-2, 1987-4). Inasmuch as we have an end stage renal dialysis service and a skilled nursing facility, the increase would be anticipated given the overall effect of renal disease impacting all body systems as well as the advancing age of the population.

Finally, comparison of death rates among hospitals and within hospitals for any length of time continues to be problematic. For example, the patient population currently being admitted to hospitals as inpatients differ by age and illness intensity from those of the pre-D.R.G. population. Also it is well known that ICD-9CM codes are not an accurate reflection of the patient's severity of illness index, but rather a diagnostic code used for billing.

(Continued)

In conclusion, we believe we must comment on the cost of resources consumed in the overall completion of the study. From the government perspective, one can only guess - millions I would judge. From the facility, the resources are significant. Does the study reflect quality of care? There is little evidence to support this assumption. Is it duplicative of already on-going facility quality assurance? You bet. Quality of care designed to retrospectively review deaths of patients, the vast majority terminally ill, represents a limited perspective of quality review. Quality issues in health care must be reviewed concurrently while the patient is receiving health care services.

Sincerely,

Barbara

Barbara Philibert, R.N., Ph.D.
Associate Administrator of Patient Care

BP/jbm

MORRIS HOSP

150 W HIGH ST
MORRIS, IL 60450

Medicare Hospital Provider Number: 140101

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	799	10	11 - 16	864	11	11 - 16
Cancer	34	38	27 - 61	26	54	29 - 67
Cerebrovascular Accidents	29	24	13 - 46	42	26	15 - 43
Gastrointestinal Catastrophes	4	25	5 - 80	9	44	9 - 69
Infectious Disease	13	15	16 - 59	14	36	17 - 66
Metabolic/Electrolyte Disorders	18	22	13 - 54	15	7	4 - 43
Pulmonary Disease	59	15	17 - 38	76	16	14 - 34
Renal Failure	0	-	-	2	100	9 - 99
Severe Acute Heart Disease	29	24	22 - 55	32	34	26 - 59
Severe Chronic Heart Disease	69	19	13 - 33	69	17	14 - 34
Severe Trauma	1	0	1 - 97	1	0	1 - 97
Gastrointestinal Disease	84	0	2 - 7	94	1	1 - 8
Gynecologic Disease	8	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	118	4	1 - 11	125	1	2 - 7
Musculoskeletal/Skin Conditions	69	0	1 - 8	71	1	0 - 13
Neuropsychiatric/Sensory Disease	12	0	0 - 97	16	6	0 - 76
Urologic Disease	29	0	0 - 25	38	3	1 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	94
Occupancy Rate (%):	51
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	31
Percent of Physicians Who Are Board Certified Specialists:	35
Interns and Residents:	0
Registered Nurses:	75
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MORRIS HOSPITAL
150 West High Street Morris, IL 60450 (815) 942-2932

October 21, 1988

Mrs. Sandra Kappert
Health Standards & Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

In reviewing the data presented by the Health Care Financing Administration, it is noted that Morris Hospital again this year fell within the predicted mortality rate for the sixteen given diagnoses. Although we are pleased with this information, we agree that a single review of data cannot be used to make a judgment regarding the quality of care a hospital provides. When additional statistical measures to deal with complex issues such as severity of illness are developed, mortality studies may become useful as one indicator of quality.

In specific regard to Morris Hospital, it is important to note that 36% of the patients that Morris Hospital services are Medicare patients. This older patient population characteristically has a higher severity of illness, i.e. patients who are sicker. These patients typically have chronic conditions such as heart and respiratory diseases, or terminal illnesses. In this patient population, many suffer from co-morbid conditions (previously existing conditions, such as diabetes) which increase the likelihood of mortality. These patients comprise 74% of Morris Hospital's total mortality rate. Fifty-three percent of these patients were age 80 and over, forty-seven percent were between 65 and 80.

In this study, you have listed 147 Medicare deaths of patients whose last hospital discharge was at Morris Hospital in 1987. Of these, ten patient deaths appeared in the study twice. Eighty-two of these patient deaths did not occur in the hospital itself. There were four patients of Medicare age deaths that appeared in our internal records that did not appear in the study.

Primarily, statistics are used to identify areas for review. These statistics come from many sources, such as the mortality studies presented here by the Health Care Financing Administration or the Joint Commission on Accreditation of Hospitals or other agencies. Any indication of a problem through review of statistics is brought to the attention of the Quality

Assurance Committee and further investigation takes place. In regard to mortality review, departments of the medical staff at Morris Hospital review all patient deaths on a monthly basis. Physicians on staff review each death to confirm that the care that the patient received meets prevailing standards of care. The review process may yield insights on ways to reduce death. If corrective actions are warranted, such steps are taken.

Mortality data is only one aspect of Morris Hospital's ongoing quality assurance program. The quality assurance program is set forth by its Board of Trustees and carried out through a Hospital-wide Quality Assurance Committee. As part of the quality assurance program, patient care is routinely reviewed by the Medical Staff through a process called "peer review" to confirm that care is delivered to patients appropriately and efficiently.

In conclusion, although we statistically fall in the predicted rates, we do not consider mortality data meaningful in isolation. At present, our peer review systems and overall quality assurance program focus on our goal...to provide optimum health care within the framework of Federal and State legislation and the standards issued by the Joint Commission on Accreditation of Hospitals.

Morris Hospital's Quality Assurance Program is dedicated to inspiring confidence in the services the hospital provides, and is an ongoing program.

Sincerely,

Clifford L. Corbett
Vice President

CLC/ld

MORRISON COMMUNITY HOSPITAL

303 N JACKSON STREET
MORRISON, IL 61270

Medicare Hospital Provider Number: 140173

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	175	21	8 - 21	183	15	8 - 19
Cancer	7	71	19 - 80	7	71	17 - 78
Cerebrovascular Accidents	5	100	9 - 65	10	30	9 - 63
Gastrointestinal Catastrophes	2	50	5 - 93	3	67	9 - 90
Infectious Disease	0	-	-	1	100	1 - 97
Metabolic/Electrolyte Disorders	4	25	1 - 87	8	0	8 - 52
Pulmonary Disease	9	56	8 - 67	5	40	8 - 79
Renal Failure	1	100	1 - 97	1	100	2 - 97
Severe Acute Heart Disease	7	57	15 - 78	3	33	10 - 90
Severe Chronic Heart Disease	7	29	5 - 68	8	50	6 - 68
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	18	0	0 - 41	18	0	0 - 32
Gynecologic Disease	0	-	-	3	0	0 -100
Low-Risk Heart Disease	22	0	0 - 29	24	4	1 - 34
Musculoskeletal/Skin Conditions	13	8	0 - 99	17	6	0 - 80
Neuropsychiatric/Sensory Disease	2	50	0 -100	8	0	0 - 98
Urologic Disease	8	0	0 -100	10	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	86
Occupancy Rate (%):	40
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	43
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	16
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MT SINAI HOSP MEDICAL CENTER

2755 W 15TH ST
CHICAGO, IL 60608

Medicare Hospital Provider Number: 140018

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,217	14	10 - 16	1,304	14	10 - 15
Cancer	59	49	26 - 55	55	51	30 - 59
Cerebrovascular Accidents	51	33	15 - 42	46	28	13 - 41
Gastrointestinal Catastrophes	15	20	13 - 57	8	38	8 - 70
Infectious Disease	38	26	25 - 57	52	40	23 - 53
Metabolic/Electrolyte Disorders	27	22	7 - 44	44	5	9 - 32
Pulmonary Disease	65	29	15 - 39	78	33	15 - 38
Renal Failure	5	0	6 - 70	9	33	9 - 74
Severe Acute Heart Disease	35	40	20 - 53	36	47	23 - 56
Severe Chronic Heart Disease	92	14	14 - 30	68	12	13 - 30
Severe Trauma	3	33	2 - 87	3	0	1 - 83
Gastrointestinal Disease	61	3	0 - 18	66	3	0 - 18
Gynecologic Disease	4	25	0 -100	4	0	0 -100
Low-Risk Heart Disease	105	6	1 - 14	122	4	1 - 11
Musculoskeletal/Skin Conditions	97	2	1 - 10	97	0	0 - 7
Neuropsychiatric/Sensory Disease	46	7	0 - 72	63	0	0 - 11
Urologic Disease	36	0	0 - 27	44	0	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	376
Occupancy Rate (%):	76
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	326
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	91
Registered Nurses:	390
Licensed Practical Nurses:	40

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MT SINAI HOSPITAL - NORTH

2451 W HOWARD STREET
CHICAGO, IL 60645

Medicare Hospital Provider Number: 140099

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	452	11	9 - 16	567	13	9 - 16
Cancer	6	17	7 - 69	8	75	17 - 74
Cerebrovascular Accidents	7	0	7 - 53	10	20	8 - 59
Gastrointestinal Catastrophes	1	0	3 - 98	3	0	6 - 80
Infectious Disease	9	33	13 - 70	19	47	19 - 64
Metabolic/Electrolyte Disorders	12	25	6 - 58	14	21	4 - 53
Pulmonary Disease	27	22	15 - 48	45	29	15 - 43
Renal Failure	2	50	3 - 92	6	33	10 - 81
Severe Acute Heart Disease	21	38	21 - 62	14	57	17 - 66
Severe Chronic Heart Disease	26	23	10 - 44	30	20	10 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	34	3	0 - 31	40	0	1 - 14
Gynecologic Disease	1	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	61	5	1 - 19	76	0	2 - 8
Musculoskeletal/Skin Conditions	56	4	0 - 24	56	0	1 - 9
Neuropsychiatric/Sensory Disease	7	0	0 -100	14	0	0 - 97
Urologic Disease	27	0	0 - 77	25	0	0 - 85

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	135
Occupancy Rate (%):	30
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MEDICARE PROVIDER # 140099

Operated by Universal Health Services and
Mount Sinai Hospital Medical Center
An Affiliate of
The Jewish Federation of Metropolitan Chicago
An Affiliate of University of Health Sciences/
the Chicago Medical School
An Affiliate of
Schwab Rehabilitation Center

Mount Sinai Hospital

North

2451 West Howard Street
Chicago, Illinois 60645
312 761-6000

October 25, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

As requested we are listing below, separately from your report, our comments regarding the Medicare Hospital Mortality Information report.

1. Mortality Rates fall within range.

2. AHA Hospital Characteristics should be changed as follows:

   Specialty Services:

   Coronary Care Unit: YES
   Organ Transplant Service: NO

If you need any further information please let us know.

Sincerely,

Dennis Citrin

Dennis Citrin, MD
Medical Staff Director

DC:lf

NORTHERN ILLINOIS MEDICAL CENTER

4201 MEDICAL CENTER DRIVE
MCHENRY, IL 60050

Medicare Hospital Provider Number: 140116

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,334	13	11 - 16	1,315	13	11 - 16
Cancer	48	52	30 - 61	31	48	25 - 61
Cerebrovascular Accidents	63	21	16 - 38	51	29	15 - 41
Gastrointestinal Catastrophes	17	41	14 - 61	10	30	11 - 66
Infectious Disease	33	36	21 - 56	32	41	18 - 55
Metabolic/Electrolyte Disorders	36	22	11 - 43	27	11	13 - 44
Pulmonary Disease	94	30	17 - 38	108	33	18 - 39
Renal Failure	5	40	12 - 86	6	50	9 - 81
Severe Acute Heart Disease	67	34	27 - 51	66	36	29 - 53
Severe Chronic Heart Disease	80	22	13 - 33	98	21	14 - 32
Severe Trauma	3	0	2 - 80	2	0	2 - 88
Gastrointestinal Disease	100	2	1 - 10	79	4	1 - 13
Gynecologic Disease	9	0	0 -100	14	7	0 -100
Low-Risk Heart Disease	158	5	1 - 10	158	4	1 - 9
Musculoskeletal/Skin Conditions	143	1	1 - 7	161	2	1 - 7
Neuropsychiatric/Sensory Disease	35	3	0 - 28	38	0	0 - 18
Urologic Disease	59	0	0 - 13	52	2	0 - 24

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	158
Occupancy Rate (%):	67
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	77
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	0
Registered Nurses:	141
Licensed Practical Nurses:	16

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

NORTHWEST COMM HOSP

800 W CENTRAL ROAD
ARLINGTON HEIGHTS, IL 60005

Medicare Hospital Provider Number: 140252

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,400	11	11 - 15	3,292	12	11 - 15
Cancer	164	41	33 - 53	166	37	32 - 52
Cerebrovascular Accidents	148	22	18 - 34	147	31	21 - 38
Gastrointestinal Catastrophes	27	22	15 - 51	28	36	18 - 56
Infectious Disease	55	25	22 - 50	38	32	22 - 56
Metabolic/Electrolyte Disorders	48	25	11 - 41	70	10	10 - 33
Pulmonary Disease	167	26	20 - 36	151	23	17 - 34
Renal Failure	22	45	17 - 70	17	41	17 - 74
Severe Acute Heart Disease	135	42	30 - 49	102	42	31 - 53
Severe Chronic Heart Disease	148	21	16 - 31	153	23	17 - 32
Severe Trauma	8	25	6 - 66	6	0	6 - 60
Gastrointestinal Disease	257	2	1 - 6	258	2	2 - 6
Gynecologic Disease	32	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	422	2	2 - 5	379	2	2 - 5
Musculoskeletal/Skin Conditions	386	3	1 - 5	417	2	1 - 5
Neuropsychiatric/Sensory Disease	72	4	0 - 23	94	1	1 - 9
Urologic Disease	141	1	0 - 7	138	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	420
Occupancy Rate (%):	83
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	296
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	445
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

NORTHWEST
COMMUNITY
HOSPITAL

800 West Central Road
Arlington Heights, Illinois 60005
312-259-1000

October 20, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau
2D2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21201

Medicare Provider No.: 140252

Dear Mrs. Kappert:

Thank you for this opportunity to respond to the release of data on hospital mortality rates for 1987. Northwest Community Hospital's staff has reviewed the data to determine its validity and accuracy. In general, we have found the data to be valid, with the attached exceptions regarding hospital characteristics.

To give you a framework for understanding our response, our hospital is a 400 bed acute care facility, whose case mix includes many patients with major medical and surgical illnesses. We are a full service medical center offering care in specialty areas of oncology, major orthopedic services, psychiatric care, as well as general medicine and surgery.

Our Hospital believes that evaluating the overall quality of care can only be achieved by reviewing a broad range of clinical and management factors. Looking at an individual factor in isolation of the others would not be an accurate reflection. After a careful critique of all the factors, Northwest Community Hospital strives to make corrective actions whenever we stray from our patient care goals and objectives. Mortality data is one factor our Hospital uses in the review of quality care.

Mortality review is an ongoing process of our quality assurance program. The Medical Staff at Northwest Community Hospital conducts an intensive review of the medical record of every patient who expires at this facility regarding medical management and overall care. However, mortality information is not, in itself, a measure of hospital performance. At best it can be used to focus quality assurance activities and to provide one indicator for improving management of our patients. These mortality data statistics alone are not adequate to base or judge the quality of care provided by hospitals. We hope this important point is made clear to the media who will report the information.

Thank you for the opportunity to present this response.

Sincerely,

Malcolm D. MacCoun
President

An affiliate of Central Health Care Corporation

NORTHWESTERN MEMORIAL HOSPITAL

250 E SUPERIOR STREET
CHICAGO, IL 60611

Medicare Hospital Provider Number: 140281

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,225	9	9 - 13	4,193	9	9 - 13
Cancer	217	42	35 - 54	218	35	31 - 50
Cerebrovascular Accidents	130	11	19 - 33	114	19	19 - 36
Gastrointestinal Catastrophes	34	38	20 - 56	26	31	21 - 59
Infectious Disease	41	39	23 - 55	22	32	16 - 57
Metabolic/Electrolyte Disorders	57	25	16 - 44	50	24	15 - 44
Pulmonary Disease	119	31	17 - 37	153	21	19 - 36
Renal Failure	29	10	4 - 54	29	10	2 - 56
Severe Acute Heart Disease	141	30	31 - 49	130	35	30 - 49
Severe Chronic Heart Disease	153	11	16 - 28	125	23	17 - 34
Severe Trauma	8	50	5 - 70	10	40	5 - 65
Gastrointestinal Disease	258	4	1 - 8	246	1	2 - 6
Gynecologic Disease	35	0	0 -100	36	0	0 -100
Low-Risk Heart Disease	544	1	2 - 5	506	5	2 - 7
Musculoskeletal/Skin Conditions	467	1	1 - 4	475	2	1 - 5
Neuropsychiatric/Sensory Disease	257	3	1 - 7	294	1	1 - 5
Urologic Disease	163	1	0 - 6	171	0	1 - 5

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	761
Occupancy Rate (%):	76
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	774
Percent of Physicians Who Are Board Certified Specialists:	90
Interns and Residents:	285
Registered Nurses:	1,075
Licensed Practical Nurses:	77

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

NORWEGIAN-AMERICAN HOSP

1044 N FRANCISCO AVE
CHICAGO, IL 60622

Medicare Hospital Provider Number: 140206

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	304	8	6 - 14	334	12	8 - 16
Cancer	6	33	11 - 77	2	0	9 - 92
Cerebrovascular Accidents	7	0	7 - 53	12	8	10 - 49
Gastrointestinal Catastrophes	1	0	0 - 99	7	43	10 - 74
Infectious Disease	4	0	7 - 72	11	45	8 - 64
Metabolic/Electrolyte Disorders	8	13	4 - 60	3	0	1 - 84
Pulmonary Disease	26	15	13 - 44	32	34	14 - 48
Renal Failure	3	67	8 - 90	1	0	0 - 98
Severe Acute Heart Disease	7	43	8 - 72	5	20	8 - 76
Severe Chronic Heart Disease	10	20	5 - 58	16	19	13 - 53
Severe Trauma	0	-	-	1	0	0 - 99
Gastrointestinal Disease	34	0	0 - 31	30	0	0 - 33
Gynecologic Disease	4	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	33	0	0 - 22	35	0	0 - 19
Musculoskeletal/Skin Conditions	25	12	0 -100	39	3	0 - 41
Neuropsychiatric/Sensory Disease	4	0	0 -100	3	0	0 -100
Urologic Disease	23	0	0 - 83	17	0	0 - 82

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	230
Occupancy Rate (%):	50
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	116
Percent of Physicians Who Are Board Certified Specialists:	46
Interns and Residents:	0
Registered Nurses:	141
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

NORWEGIAN
AMERICAN
HOSPITAL

1044 N. Francisco Ave.
Chicago, IL 60622
312 278-8800

CHAIRMAN
[redacted] Dahl

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PRESIDENT
Michael H. Sussman

October 19, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Medicare Provider # 140206
Medicare Hospital Mortality Information (1987)

Dear Mrs. Kappert:

I am writing with respect to your letter of September 15, 1988 regarding mortality information about Medicare patients discharged from Norwegian-American Hospital in 1987.

In the document entitled "Patients Whose Last Discharge in 1987 Was From Norwegian-American Hospital" under Diagnostic Category: Pulmonary Disease, Medical Record # [redacted] shows a date of discharge of [redacted], a date of death of [redacted] and death within 30 days of "Yes". An inconsistency appears in this data in that the patient's death is recorded prior to the recorded date of discharge. The Hospital records indicate that the patient's date of death was [redacted] not [redacted] and therefore the date of discharge should be [redacted].

Sincerely,

Michael H. Sussman
President/CEO

OAK FOREST HOSPITAL

15900 SOUTH CICERO
OAK FOREST, IL 60452

Medicare Hospital Provider Number: 140298

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	533	40	18 - 27	621	43	19 - 27
Cancer	1	100	2 - 98	4	25	10 - 83
Cerebrovascular Accidents	4	75	6 - 80	6	50	4 - 74
Gastrointestinal Catastrophes	5	60	4 - 78	2	0	8 - 91
Infectious Disease	70	49	24 - 52	78	55	28 - 56
Metabolic/Electrolyte Disorders	13	46	13 - 65	17	59	5 - 54
Pulmonary Disease	101	64	24 - 46	138	64	26 - 46
Renal Failure	10	80	22 - 80	4	75	15 - 91
Severe Acute Heart Disease	14	71	25 - 71	21	81	29 - 64
Severe Chronic Heart Disease	31	65	15 - 49	33	55	12 - 46
Severe Trauma	0	-	-	1	0	0 -100
Gastrointestinal Disease	15	7	0 -100	15	0	0 -100
Gynecologic Disease	1	0	0 -100	0	-	-
Low-Risk Heart Disease	21	14	0 - 51	17	6	0 - 60
Musculoskeletal/Skin Conditions	20	10	0 - 76	31	0	0 - 29
Neuropsychiatric/Sensory Disease	14	0	0 - 49	17	0	0 - 62
Urologic Disease	17	6	0 - 99	15	0	0 - 51

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	1,127
Ownership/Control:	Local Government

STAFFING

Interns and Residents:	5
Registered Nurses:	98
Licensed Practical Nurses:	39

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Oak Forest Hospital

15900 South Cicero Avenue • Oak Forest, Illinois 60452 • Phone: (312) 687-7200 • Chicago: (312) 928-4200

October 17, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Medicare Provider # 14-0298

Dear Dr. Roper:

Like last year, Oak Forest Hospital feels compelled to respond to mortality data published by the Health Care Financing Administration.

We continue to express bewilderment as to why Oak Forest Hospital is included in a mortality study with short-term acute care hospitals. It is frustrating that your agency has ignored our comments from the previous data release. Once again, Oak Forest Hospital is compared to facilities completely different from itself.

As stated last year for your action, our 996 bed facility has a unique mission in comparison to most of this nation's hospitals. Oak Forest Hospital treats unusually high numbers of severely ill patients as the only licensed and accredited chronic disease hospital in the State of Illinois. Our health care center successfully fulfills its mission. Dedicated professionals are devoted to the diagnosis, treatment, rehabilitation, and long-term care of adults suffering from chronic illnesses, degenerative diseases, and physical impairments. Over 100 hospitals and nursing homes in the Chicago metropolitan area refer patients to Oak Forest Hospital for progressive medical services, continuing care, and compassionate treatment.

Oak Forest Hospital's efforts to provide high quality health care have received recognition by the Joint Commission on Accreditation of Healthcare Organizations. Because of the quality health care services available and a dedicated professional staff, Oak Forest Hospital has maintained accreditation by the JCAHO since 1970.

We do not dispute your agency's claim that Oak Forest Hospital experienced a 40% Medicare mortality rate in calendar year 1987. In three of the sixteen diagnostic categories found in the study, HCFA's "actual mortality rate" falls outside the range of "predicted mortality." Once again, this data might paint a distorted picture of Oak Forest Hospital. We continue to maintain that these statistics in no way measure the quality of care delivered to a unique patient population.

Our mission statement has been defined to HCFA repeatedly. Perhaps a review of Oak Forest Hospital's "resident characteristics" as documented by your agency in a recent nursing home study, would assist you and the public in understanding the types of patients admitted to and treated by a chronic disease hospital. These are the characteristics of patients admitted to our acute hospital from our chronic disease hospital. For example, 100% of our long-term care patients require some or total assistance in bathing. Similarly, 86% of our long-term care patients require

some or total assistance in dressing. Approximately 84% of Oak Forest Hospital's long-term patients need some or total assistance in toileting. More than 78% of our patients have partial or total loss of bowel or bladder control. A great number of these long-term patients (84%) cannot move from a bed to a chair without staff assistance. In other resident characteristics, one can observe that Oak Forest Hospital's patients are much sicker and much more dependent than patients found in other acute hospitals. Upon review of these resident characteristics, no one can argue that the chronically ill patients entrusted to our care have very limited functional status. There is a direct correlation between a patient's functional status and his ability to recover from an acute illness. Typically, our patients have been at a less than normal functional status for several months or years.

The HCFA mortality study fails to take into account a patient's functional status and the duration of his chronic illnesses and disabilities. Physicians refer patients with minimal function to our health care center for continuing care. These patients' medical status will over time deteriorate and death is often the expected outcome.

For these reasons, Oak Forest Hospital's mortality rates will fall outside the predicted range. These repeated differences between actual and predicted rates strengthen the case for concluding that Oak Forest Hospital is not the average hospital. The mortality rate published by HCFA is only attributable to the types of patients treated at Oak Forest Hospital. Repeated differences between actual and predicted rates do not indicate anything about the quality of care provided by our hospital.

We believe that Oak Forest Hospital was included in the HCFA mortality study only because of the health care center's participation in the Medicare program. It may be that Oak Forest Hospital is the only chronic disease hospital found in the mortality study. Usually chronic disease hospitals discharge their acute patients to acute care hospitals in the nearby community. Oak Forest Hospital is proud to provide continuity of care to its chronic disease patients by transferring them to our 145 bed acute hospital located within our physical structure. Please do not negatively judge our health care center because of our commitment to provide care to the chronically ill.

Our health care center does not intend to ignore the mortality information supplied by your agency. As always, quality of patient care is identified, evaluated, and monitored on a regular basis by several hospital-based health care committees. Any deficiencies observed are corrected promptly. These committees include Utilization Review, Infection Control, Pharmacy and Therapuetics and hospital-wide Quality Assurance. We fully cooperate with regulatory and voluntary agencies to maintain quality patient care services. We intend to perform focused audits on the patients who were included in HCFA's mortality study for calendar year 1987. This review should assist us further in monitoring medical practices.

We commend HCFA's effort to provide consumers with pertinent health care information. We especially give credit to your agency for making adjustments for age of beneficiaries and for prior hospitalizations.

Thank you for the opportunity to respond to the HCFA Mortality Study. We are hopeful that in the future you will closely evaluate our special hospital more effectively and in a different manner.

Sincerely,

Edmind G. Lawler
Director

EGL/LO/mh

cc: Mr. Earl Bird, MCHC
Mr. Kenneth Robbins, IHA

OAK PARK HOSP

520 S MAPLE AVE
OAK PARK, IL 60304

Medicare Hospital Provider Number: 140063

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,084	14	11 - 15	2,199	15	11 - 16
Cancer	77	45	26 - 52	69	45	30 - 57
Cerebrovascular Accidents	77	30	18 - 40	92	35	19 - 40
Gastrointestinal Catastrophes	21	38	16 - 59	29	38	19 - 58
Infectious Disease	33	36	18 - 54	28	32	22 - 59
Metabolic/Electrolyte Disorders	31	23	12 - 46	38	26	11 - 44
Pulmonary Disease	134	29	20 - 38	140	28	19 - 37
Renal Failure	14	64	18 - 76	11	64	19 - 81
Severe Acute Heart Disease	66	36	25 - 50	85	35	26 - 49
Severe Chronic Heart Disease	171	27	16 - 31	159	30	18 - 34
Severe Trauma	5	40	7 - 79	3	0	5 - 80
Gastrointestinal Disease	154	3	1 - 9	182	4	1 - 9
Gynecologic Disease	14	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	284	1	2 - 5	276	3	2 - 6
Musculoskeletal/Skin Conditions	196	4	1 - 8	207	4	1 - 8
Neuropsychiatric/Sensory Disease	54	4	0 - 40	49	2	0 - 19
Urologic Disease	100	3	0 - 12	96	2	0 - 12

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	353
Occupancy Rate (%):	48
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	307
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	153
Licensed Practical Nurses:	25

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

520 South Maple Avenue
Oak Park, Illinois 60304-1097

312/383-9300

Oak Park Hospital

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Re: **Medicare Hospital Mortality Information (1987)**

Dear Mrs. Kappert:

We wish to submit comments relative to HCFA's forthcoming publication of the Medicare Hospital Mortality Information (1987).

In the "Hospital Characteristics" section some of the elements printed are in error with what was reported on the 1986 Annual Survey of Hospitals. The correct bed count reported was 305, not 250. The occupancy rate printed (53%) is correct based upon 305 beds. The percent of physicians who were board certified specialists should be 56%. Full-time registered nurses per bed would be .38. We also reported 20 part-time registered nurses. Full-time licensed practical nurses per bed would be .07. The hospital did report offering hospice care.

In the 1987 Annual Survey of Hospitals we reported 305 acute beds with 53,564 patient days. We also reported 48 long-term beds in operation for four months with 2,311 patient days. We reported 106 full-time registered nurses, 47 part-time. We reported 24 licensed practical nurses, 2 part-time. We reported 307 Active and Associate Medical Staff members, 212 of which were board certified specialists.

We continue to object to the release of the mortality data. The mortality statistics used by themselves are misleading and do not measure hospital performance. Inherent to the methodology and format of HCFA's mortality study is the serious potential for inaccurate interpretation by the public. The public will question whether the care provided to the hospital's patients was responsible for the outcome. HCFA's data release will confuse the public's decision process and permit dangerous poetic license to be taken by the media and/or general public in evaluating a facility's quality of care.

A major inaccuracy of the release is the use of "HCFA's mortality rate" as opposed to a true inpatient mortality rate. The mortality

data also does not provide the public with the tools to evaluate severity of illness or to know if the cause of death was related to the principle diagnosis.

Thank you for your consideration of our comments.

Sincerely,

Steven J. Schweitzer

Steven J. Schweitzer
Assistant Vice President
Patient Information Services

SJS:jfs

PALOS COMMUNITY HOSPITAL

80TH AVE AT MCCARTHY AVE
PALOS HEIGHTS, IL 60463

Medicare Hospital Provider Number: 140062

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,382	13	10 - 15	2,511	13	11 - 15
Cancer	77	43	30 - 55	80	56	33 - 58
Cerebrovascular Accidents	86	22	18 - 37	81	30	18 - 39
Gastrointestinal Catastrophes	19	53	17 - 62	20	15	23 - 59
Infectious Disease	43	51	25 - 58	41	29	24 - 56
Metabolic/Electrolyte Disorders	25	40	15 - 56	51	27	17 - 47
Pulmonary Disease	122	24	19 - 37	139	27	17 - 36
Renal Failure	11	55	20 - 82	5	60	17 - 91
Severe Acute Heart Disease	97	48	29 - 51	95	51	29 - 51
Severe Chronic Heart Disease	122	25	15 - 32	130	18	17 - 32
Severe Trauma	6	33	5 - 74	9	33	5 - 66
Gastrointestinal Disease	196	1	1 - 6	192	1	1 - 6
Gynecologic Disease	20	0	0 -100	31	0	0 - 99
Low-Risk Heart Disease	224	2	2 - 6	249	4	2 - 7
Musculoskeletal/Skin Conditions	294	3	1 - 6	299	3	1 - 6
Neuropsychiatric/Sensory Disease	45	7	0 - 32	56	2	0 - 24
Urologic Disease	107	1	0 - 10	110	2	1 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	360
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	271
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	0
Registered Nurses:	418
Licensed Practical Nurses:	48

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

PANA COMMUNITY HOSPITAL

SOUTH LOCUST STREET
PANA, IL 62557

Medicare Hospital Provider Number: 140271

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	394	13	11 - 18	437	15	10 - 17
Cancer	12	50	21 - 73	6	67	19 - 84
Cerebrovascular Accidents	17	24	14 - 54	16	31	13 - 58
Gastrointestinal Catastrophes	2	50	2 - 92	3	33	3 - 86
Infectious Disease	9	44	16 - 74	9	44	16 - 75
Metabolic/Electrolyte Disorders	10	30	3 - 63	10	30	12 - 67
Pulmonary Disease	29	24	14 - 47	23	35	10 - 50
Renal Failure	0	-	-	1	100	3 - 98
Severe Acute Heart Disease	10	50	21 - 76	17	53	22 - 67
Severe Chronic Heart Disease	27	22	12 - 44	42	26	13 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	30	0	1 - 17	37	0	0 - 16
Gynecologic Disease	2	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	49	4	1 - 18	69	3	1 - 13
Musculoskeletal/Skin Conditions	35	0	0 - 20	37	3	0 - 49
Neuropsychiatric/Sensory Disease	6	0	0 -100	10	0	0 -100
Urologic Disease	19	11	0 - 90	11	9	0 - 85

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	60
Occupancy Rate (%):	32
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	9
Percent of Physicians Who Are Board Certified Specialists:	22
Interns and Residents:	0
Registered Nurses:	25
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PARIS COMMUNITY HOSPITAL

EAST COURT STREET
PARIS, IL 61944

Medicare Hospital Provider Number: 140031

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	581	16	10 - 16	638	15	10 - 16
Cancer	13	69	21 - 69	13	54	21 - 71
Cerebrovascular Accidents	21	33	13 - 53	32	28	15 - 47
Gastrointestinal Catastrophes	4	0	4 - 71	4	75	8 - 82
Infectious Disease	11	36	13 - 67	5	0	10 - 67
Metabolic/Electrolyte Disorders	6	17	2 - 70	19	16	5 - 45
Pulmonary Disease	34	38	9 - 43	48	25	14 - 41
Renal Failure	2	50	1 - 93	0	-	-
Severe Acute Heart Disease	24	54	24 - 63	21	71	24 - 62
Severe Chronic Heart Disease	57	33	15 - 40	63	17	15 - 36
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	51	4	0 - 29	57	4	0 - 20
Gynecologic Disease	1	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	76	5	1 - 15	70	4	1 - 15
Musculoskeletal/Skin Conditions	44	0	1 - 13	40	0	0 - 21
Neuropsychiatric/Sensory Disease	13	0	0 - 97	8	0	0 -100
Urologic Disease	19	0	1 - 28	31	3	0 - 85

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	98
Occupancy Rate (%):	28
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	15
Percent of Physicians Who Are Board Certified Specialists:	40
Interns and Residents:	0
Registered Nurses:	38
Licensed Practical Nurses:	18

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PARKSIDE LUTHERAN HOSPITAL

1700 LUTHER LANE
PARK RIDGE, IL 60068

Medicare Hospital Provider Number: 140299

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	69	0	0 - 13	2	0	0 -100
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	0	-	-
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	0	-	-
Musculoskeletal/Skin Conditions	0	-	-	0	-	-
Neuropsychiatric/Sensory Disease	69	0	0 - 13	2	0	0 -100
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	102
Ownership/Control:	Church

STAFFING

Interns and Residents:	0
Registered Nurses:	41
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	Yes

Parkside Lutheran Hospital
Park Ridge, Illinois

Provider Number: 14-0299

The hospital's comments consisted primarily of annotations to the patient specific information and/or the hospital characteristics generated by the Health Care Financing Administration and provided to the hospital. We did not publish this annotated information.

PASSAVANT MEMORIAL AREA HOSPITAL

1600 W WALNUT ST
JACKSONVILLE , IL 62650

Medicare Hospital Provider Number: 140058

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,833	13	9 - 14	1,784	13	9 - 14
Cancer	36	47	30 - 64	30	40	24 - 60
Cerebrovascular Accidents	64	34	18 - 42	46	33	15 - 43
Gastrointestinal Catastrophes	11	45	12 - 68	13	38	14 - 65
Infectious Disease	9	56	9 - 68	16	19	12 - 54
Metabolic/Electrolyte Disorders	21	43	6 - 51	25	52	10 - 51
Pulmonary Disease	155	28	16 - 34	118	30	19 - 38
Renal Failure	5	80	10 - 81	4	50	5 - 85
Severe Acute Heart Disease	44	57	24 - 54	65	62	29 - 54
Severe Chronic Heart Disease	95	29	17 - 36	95	21	13 - 31
Severe Trauma	1	0	0 -100	3	0	10 - 83
Gastrointestinal Disease	175	3	1 - 8	161	3	1 - 8
Gynecologic Disease	18	0	0 - 94	19	0	0 -100
Low-Risk Heart Disease	216	4	2 - 8	198	5	2 - 9
Musculoskeletal/Skin Conditions	180	3	1 - 8	185	2	1 - 6
Neuropsychiatric/Sensory Disease	67	0	1 - 9	65	3	0 - 19
Urologic Disease	62	2	0 - 14	73	5	0 - 25

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	168
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	51
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	117
Licensed Practical Nurses:	56

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PAXTON COMM HOSP

651 E PELLS ST
PAXTON, IL 60957

Medicare Hospital Provider Number: 140157

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	56	27	8 - 32	148	15	9 - 21
Cancer	3	100	8 - 81	2	50	1 - 93
Cerebrovascular Accidents	1	100	2 - 97	10	50	7 - 64
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	1	0	0 - 98	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	2	0	1 - 91
Pulmonary Disease	8	25	12 - 69	20	20	12 - 49
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	2	100	10 - 94	8	38	12 - 72
Severe Chronic Heart Disease	6	50	3 - 74	13	23	7 - 54
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	3	0	0 -100	8	0	0 - 99
Gynecologic Disease	0	-	-	4	0	0 -100
Low-Risk Heart Disease	11	9	0 - 95	12	8	0 - 94
Musculoskeletal/Skin Conditions	7	0	0 -100	12	0	0 - 80
Neuropsychiatric/Sensory Disease	2	0	0 -100	5	0	0 -100
Urologic Disease	0	-	-	5	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	30
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	15
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

PEARCE HOSPITAL FOUNDATION INC

1901 ORGAN STREET
ELDORADO, IL 62930

Medicare Hospital Provider Number: 140247

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	319	13	10 - 18	352	11	8 - 16
Cancer	7	86	25 - 80	3	67	8 - 89
Cerebrovascular Accidents	9	22	6 - 61	10	40	9 - 65
Gastrointestinal Catastrophes	0	-	-	1	0	0 - 98
Infectious Disease	2	50	6 - 94	7	14	13 - 70
Metabolic/Electrolyte Disorders	4	0	4 - 71	2	50	2 - 92
Pulmonary Disease	17	18	11 - 50	16	25	10 - 54
Renal Failure	4	0	8 - 76	2	50	1 - 93
Severe Acute Heart Disease	3	0	9 - 81	10	70	20 - 73
Severe Chronic Heart Disease	30	30	15 - 48	18	22	15 - 54
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	26	0	0 - 30	28	0	0 - 21
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	48	6	0 - 24	63	3	1 - 14
Musculoskeletal/Skin Conditions	35	9	0 - 72	45	2	0 - 22
Neuropsychiatric/Sensory Disease	7	0	0 -100	6	17	0 - 91
Urologic Disease	8	0	0 - 88	15	0	0 - 95

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	72
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

PEKIN MEMORIAL HOSPITAL

COURT AND 14TH STREET
PEKIN, IL 61554

Medicare Hospital Provider Number: 140120

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,326	14	9 - 14	1,315	14	9 - 14
Cancer	33	48	27 - 62	33	55	26 - 61
Cerebrovascular Accidents	55	27	18 - 43	51	31	17 - 43
Gastrointestinal Catastrophes	8	50	10 - 72	9	22	12 - 67
Infectious Disease	11	45	14 - 69	8	25	8 - 67
Metabolic/Electrolyte Disorders	21	19	11 - 49	15	20	6 - 52
Pulmonary Disease	87	39	18 - 41	78	29	16 - 38
Renal Failure	7	43	14 - 83	9	89	25 - 84
Severe Acute Heart Disease	46	39	26 - 56	48	56	25 - 54
Severe Chronic Heart Disease	67	25	12 - 34	76	29	16 - 37
Severe Trauma	5	100	18 - 75	1	0	0 - 99
Gastrointestinal Disease	104	4	1 - 12	111	2	1 - 9
Gynecologic Disease	7	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	169	3	1 - 8	171	2	1 - 7
Musculoskeletal/Skin Conditions	126	4	0 - 12	123	2	0 - 10
Neuropsychiatric/Sensory Disease	52	6	0 - 46	64	6	0 - 35
Urologic Disease	39	3	0 - 40	39	3	0 - 25

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	202
Occupancy Rate (%):	47
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	68
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	111
Licensed Practical Nurses:	21

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PERRY MEMORIAL HOSPITAL

530 PARK AVENUE E
PRINCETON, IL 61356

Medicare Hospital Provider Number: 140027

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	849	14	10 - 15	835	13	9 - 15
Cancer	31	52	26 - 62	27	37	23 - 61
Cerebrovascular Accidents	36	50	11 - 44	25	32	13 - 50
Gastrointestinal Catastrophes	7	29	9 - 72	3	0	7 - 81
Infectious Disease	7	29	15 - 77	10	30	16 - 70
Metabolic/Electrolyte Disorders	4	25	4 - 80	20	10	6 - 41
Pulmonary Disease	43	33	18 - 47	39	31	17 - 47
Renal Failure	2	0	0 - 98	1	100	0 - 98
Severe Acute Heart Disease	37	43	27 - 59	41	44	25 - 56
Severe Chronic Heart Disease	58	24	13 - 36	56	27	13 - 37
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	98	1	1 - 8	86	3	0 - 14
Gynecologic Disease	10	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	91	2	1 - 10	94	1	2 - 8
Musculoskeletal/Skin Conditions	88	7	0 - 20	99	7	0 - 19
Neuropsychiatric/Sensory Disease	15	0	0 - 97	20	0	0 - 74
Urologic Disease	35	0	0 - 41	45	0	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	97
Occupancy Rate (%):	51
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	21
Percent of Physicians Who Are Board Certified Specialists:	86
Interns and Residents:	0
Registered Nurses:	79
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Perry
Memorial
Hospital

530 Park Avenue East • Princeton, Illinois 61356 • 815/875-2811

October 14, 1988

Sandra Kappert
Healthcare Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

Thank you for allowing me the opportunity to preview and make comments on the Medicare hospital mortality information as it relates to Perry Memorial Hospital (hospital ID #140027).

There is a correction which I feel should be brought to your attention. Under "staffing", Perry Memorial Hospital has 20 members of the Active Division of the Medical Staff. Of these 20, 17 are certified by their respective specialty boards.

Under "registered nurses per bed" and "licensed practical nurses per bed", I am unable to calculate the same number you have calculated. I suspect this is only because I am not familiar with the formula you use for determining this. For this reason, I certainly cannot verify those staffing numbers. Other information under the "staffing" category appears to be correct.

If I can provide further information, I would certainly do so.

Thank you.

Yours truly,

William H. Spitler, III

William H. Spitler III
President

cc: Donald R. Evans
Director of Quality Review

A:HCFA1014

PINCKNEYVILLE COMMUNITY HOSPITAL

101 NORTH WALNUT STREET
PINCKNEYVILLE, IL 62274

Medicare Hospital Provider Number: 140055

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	313	11	8 - 16	369	12	9 - 17
Cancer	4	25	14 - 87	8	75	21 - 78
Cerebrovascular Accidents	16	0	19 - 42	13	38	13 - 63
Gastrointestinal Catastrophes	1	100	0 - 99	1	0	3 - 98
Infectious Disease	3	0	15 - 87	3	67	7 - 88
Metabolic/Electrolyte Disorders	1	0	0 -100	4	25	4 - 80
Pulmonary Disease	25	32	15 - 52	23	13	18 - 49
Renal Failure	6	100	22 - 80	1	100	1 -100
Severe Acute Heart Disease	14	50	14 - 63	17	53	23 - 68
Severe Chronic Heart Disease	18	11	7 - 41	26	27	9 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	30	0	0 - 34	31	0	1 - 17
Gynecologic Disease	1	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	51	2	0 - 16	70	6	0 - 20
Musculoskeletal/Skin Conditions	37	3	0 - 35	41	0	1 - 13
Neuropsychiatric/Sensory Disease	21	0	0 - 57	21	0	0 - 80
Urologic Disease	8	0	0 -100	14	0	0 - 85

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	92
Occupancy Rate (%):	60
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	5
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	17
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PROCTOR COMMUNITY HOSPITAL

5409 N KNOXVILLE AVE
PEORIA, IL 61614

Medicare Hospital Provider Number: 140013

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,848	11	10 - 14	1,891	11	9 - 14
Cancer	54	37	26 - 55	57	40	28 - 57
Cerebrovascular Accidents	60	27	16 - 40	62	34	18 - 43
Gastrointestinal Catastrophes	18	22	14 - 56	17	18	18 - 59
Infectious Disease	23	13	20 - 53	24	25	19 - 57
Metabolic/Electrolyte Disorders	20	15	7 - 45	23	4	9 - 38
Pulmonary Disease	112	29	18 - 37	101	27	15 - 35
Renal Failure	10	80	18 - 77	9	44	17 - 83
Severe Acute Heart Disease	82	41	28 - 51	75	39	24 - 48
Severe Chronic Heart Disease	87	22	14 - 32	94	22	15 - 34
Severe Trauma	0	-	-	7	0	9 - 57
Gastrointestinal Disease	184	3	2 - 8	200	2	1 - 7
Gynecologic Disease	21	0	0 -100	21	0	0 -100
Low-Risk Heart Disease	198	1	2 - 5	198	3	1 - 7
Musculoskeletal/Skin Conditions	188	2	1 - 6	168	2	0 - 8
Neuropsychiatric/Sensory Disease	84	1	1 - 10	92	2	0 - 12
Urologic Disease	72	6	0 - 42	78	1	0 - 24

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	245
Occupancy Rate (%):	55
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	117
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	196
Licensed Practical Nurses:	61

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PROCTOR
COMMUNITY HOSPITAL

5409 N. Knoxville Avenue
Peoria, IL 61614
Phone 309-691-1000

NORMAN H. LaCONTE
President

Medicare Provider Number 14-0013

October 20, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health and Human Services
6325 Security Blvd.
Baltimore, MD 21207

Dear Dr. Roper:

The Health Care Financing Administration (HCFA) Medicare Hospital Mortality Information (1987) for Proctor Community Hospital has been carefully and thoroughly reviewed. The data have been interpreted and have been assessed through a case evaluation process.

The Hospital's Utilization Review Committee has conducted an assessment of the diagnostic category involving a higher actual mortality rate than the upper limit of the predicted mortality range. The findings of this case review are as follows:

- Death was expected to occur due to the severity of the patients' illnesses and the terminal status of the patients' medical conditions; furthermore, the terminal status was discussed completely with the patient and his/her family.

- Each patient had multiple, concurrent diagnoses with pre-existing, complicating factors.

- The analysis did not identify any discernable patterns that would indicate the need for further review through the Hospital's Utilization Review and Quality Assurance Committees.

- Changes in the care provided would not have prevented or delayed the final outcomes.

The limitations inherent to HCFA's approach in preparing this report of mortality seriously affect the ability of the general public to make informed decisions about quality of care, or the choice of a particular hospital. In this regard, it is important to bear in mind your own statement:

> . . . that the information by itself is not a complete measure of the quality of care at an individual hospital. While we believe that information on hospital mortality rates is useful, until we have developed additional statistical measures to deal with complex issues such as severity of illness, we cannot and do not recommend the use of the information by itself to make judgments about the quality of care in an individual hospital or to make comparisons among hospitals. Individual hospitals may have very good reasons for their rates being higher than the ranges predicted by HCFA's model.

We at Proctor Community Hospital believe it is of utmost importance to monitor and evaluate the quality and appropriateness of patient care. Through a comprehensive quality assurance program, the Hospital has the responsibility for assuring the public of the consistent quality of services provided by its medical and professional staff. The Hospital maintains its commitment to excellence in patient care.

Thank you for the opportunity to provide comments on this data.

Sincerely,

Norman H. LaConte
President

/cc

PROVIDENT HOSPITAL TRAINING SCHOOL

500 EAST 51ST STREET
CHICAGO, IL 60615

Medicare Hospital Provider Number: 140248

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	355	26	11 - 21	584	18	10 - 17
Cancer	7	86	21 - 77	22	41	23 - 64
Cerebrovascular Accidents	23	48	13 - 52	35	57	14 - 47
Gastrointestinal Catastrophes	2	100	11 - 95	4	50	5 - 82
Infectious Disease	6	33	12 - 78	11	36	12 - 66
Metabolic/Electrolyte Disorders	15	67	10 - 58	24	29	9 - 49
Pulmonary Disease	23	39	13 - 53	26	35	9 - 46
Renal Failure	1	0	3 - 98	4	25	10 - 86
Severe Acute Heart Disease	11	55	21 - 74	13	69	21 - 69
Severe Chronic Heart Disease	30	33	11 - 45	60	23	13 - 36
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	18	6	0 - 97	20	0	0 - 48
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	47	4	1 - 21	89	6	0 - 17
Musculoskeletal/Skin Conditions	14	0	0 - 96	41	5	0 - 80
Neuropsychiatric/Sensory Disease	6	17	0 - 94	10	0	0 - 97
Urologic Disease	14	21	0 -100	20	0	0 - 45

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	300
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	116
Licensed Practical Nurses:	54

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PUBLIC HOSPITAL OF THE TOWN OF SALEM

BRYAN MEMORIAL PARK
SALEM, IL 62881

Medicare Hospital Provider Number: 140165

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	473	9	9 - 15	439	12	9 - 16
Cancer	3	33	13 - 95	11	55	21 - 75
Cerebrovascular Accidents	16	25	11 - 53	13	23	14 - 60
Gastrointestinal Catastrophes	3	0	5 - 80	1	0	0 - 99
Infectious Disease	6	17	9 - 71	3	67	6 - 87
Metabolic/Electrolyte Disorders	8	50	15 - 77	5	20	4 - 74
Pulmonary Disease	36	8	14 - 36	35	14	12 - 39
Renal Failure	3	0	10 - 85	2	100	11 - 97
Severe Acute Heart Disease	8	38	14 - 74	17	65	24 - 68
Severe Chronic Heart Disease	42	24	15 - 42	31	29	10 - 43
Severe Trauma	1	0	1 - 97	1	0	3 - 98
Gastrointestinal Disease	57	0	1 - 10	61	0	1 - 9
Gynecologic Disease	0	-	-	2	0	0 -100
Low-Risk Heart Disease	77	3	1 - 12	73	1	1 - 10
Musculoskeletal/Skin Conditions	28	4	0 - 43	22	0	0 - 48
Neuropsychiatric/Sensory Disease	10	0	0 -100	9	0	0 -100
Urologic Disease	16	0	0 - 88	6	0	0 - 97

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	54
Occupancy Rate (%):	44
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	9
Percent of Physicians Who Are Board Certified Specialists:	89
Interns and Residents:	0
Registered Nurses:	40
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

RAVENSWOOD HOSP MED CENTER

4550 N WINCHESTER
CHICAGO, IL 60640

Medicare Hospital Provider Number: 140182

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,669	14	12 - 17	1,522	14	12 - 17
Cancer	57	32	31 - 58	42	36	33 - 64
Cerebrovascular Accidents	75	29	17 - 39	66	24	18 - 41
Gastrointestinal Catastrophes	18	28	19 - 62	19	47	18 - 63
Infectious Disease	26	38	24 - 63	18	39	23 - 67
Metabolic/Electrolyte Disorders	29	31	14 - 51	44	23	17 - 47
Pulmonary Disease	148	34	20 - 39	131	29	21 - 40
Renal Failure	8	13	14 - 74	10	60	20 - 83
Severe Acute Heart Disease	69	43	29 - 54	64	50	28 - 54
Severe Chronic Heart Disease	104	28	15 - 33	90	18	14 - 32
Severe Trauma	1	100	1 - 97	1	100	0 - 98
Gastrointestinal Disease	116	6	1 - 12	101	4	1 - 12
Gynecologic Disease	13	0	0 -100	8	13	0 -100
Low-Risk Heart Disease	199	4	1 - 8	155	5	1 - 10
Musculoskeletal/Skin Conditions	137	2	1 - 8	138	4	1 - 10
Neuropsychiatric/Sensory Disease	39	0	0 - 16	48	2	0 - 18
Urologic Disease	52	0	0 - 13	66	3	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	355
Occupancy Rate (%):	72
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	179
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	46
Registered Nurses:	262
Licensed Practical Nurses:	15

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

RESURRECTION HOSPITAL

7435 W TALCOTT
CHICAGO, IL 60631

Medicare Hospital Provider Number: 140117

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,659	12	10 - 14	4,629	13	11 - 15
Cancer	165	43	29 - 49	213	41	31 - 50
Cerebrovascular Accidents	245	27	19 - 33	236	22	20 - 33
Gastrointestinal Catastrophes	33	45	22 - 59	42	40	19 - 53
Infectious Disease	43	30	22 - 53	37	41	21 - 56
Metabolic/Electrolyte Disorders	66	38	17 - 46	41	29	10 - 43
Pulmonary Disease	251	31	20 - 35	256	27	19 - 34
Renal Failure	13	38	11 - 71	20	30	13 - 68
Severe Acute Heart Disease	185	36	32 - 49	203	43	32 - 49
Severe Chronic Heart Disease	265	21	16 - 28	303	25	18 - 31
Severe Trauma	11	9	8 - 53	9	44	6 - 68
Gastrointestinal Disease	372	5	1 - 7	375	1	1 - 5
Gynecologic Disease	46	0	0 - 99	35	0	0 - 97
Low-Risk Heart Disease	478	3	2 - 6	484	5	2 - 7
Musculoskeletal/Skin Conditions	438	3	1 - 6	475	3	1 - 5
Neuropsychiatric/Sensory Disease	172	3	0 - 9	177	2	0 - 9
Urologic Disease	248	2	1 - 6	155	3	0 - 12

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	749
Occupancy Rate (%):	80
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	261
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	20
Registered Nurses:	349
Licensed Practical Nurses:	56

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Resurrection
Hospital

7435 West Talcott Avenue Chicago, Illinois 60631 312-774-8000

October 19, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau
Healthcare Financing Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Resurrection Hospital Mortality Data
Hospital I.D. No. 14-0117

Dear Mrs. Kappert:

Thank you for giving Resurrection Medical Center the opportunity to comment on HCFA's Mortality Data. We have reviewed the information which you have given to us and do not have any comments to make regarding the mortality data itself. The numbers for Resurrection Hospital fall well within the norms which you have established for us.

We do have some concerns about the hospital characteristics. The number of beds for Resurrection Hospital is 454, not 280 as listed. Also, the percent of physicians who are Board Certified Specialists is 75.8% rather than 57%. The number of registered nurses per bed is .89 rather than 1.37. The number of licensed practical nurses per bed is .14 rather than .25. We would appreciate having those adjustments made to the information in your data base.

As always, we are concerned that mortality as the measure of quality may not be an appropriate measuring tool. Also, the fact that the severity of the patient's illness at the time of their admission is not taken into account in your statistical methodology, is of concern. One patient with a particular disease may not have the same severity factor that another patient with the same disease may have. The stage of the person's illness at the time of admission is also extremely important.

Thank you for giving us the opportunity to preview the mortality data prior to publication. We feel that the care that we offer at Resurrection Medical Center is of the highest quality. We look forward to providing many more years of service to our patients.

Sincerely,

Sr. Mary Gerard, CR

Sister Mary Gerard, C.R.
Executive Vice President

SMGCR/mw

RICHLAND MEMORIAL HOSPITAL

800 EAST LOCUST
OLNEY , IL 62450

Medicare Hospital Provider Number: 140147

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,040	13	10 - 15	1,152	13	11 - 16
Cancer	34	50	26 - 61	16	38	24 - 70
Cerebrovascular Accidents	41	29	17 - 46	51	27	16 - 42
Gastrointestinal Catastrophes	3	0	5 - 79	3	100	5 - 79
Infectious Disease	8	38	7 - 69	5	80	13 - 80
Metabolic/Electrolyte Disorders	13	0	8 - 41	24	13	8 - 42
Pulmonary Disease	63	30	17 - 42	81	21	19 - 40
Renal Failure	10	60	24 - 87	10	50	20 - 84
Severe Acute Heart Disease	49	51	25 - 54	71	44	30 - 55
Severe Chronic Heart Disease	50	24	15 - 40	73	23	17 - 38
Severe Trauma	0	-	-	1	0	0 -100
Gastrointestinal Disease	106	0	1 - 6	95	3	1 - 12
Gynecologic Disease	7	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	116	4	1 - 11	153	3	2 - 8
Musculoskeletal/Skin Conditions	98	4	0 - 17	82	4	1 - 13
Neuropsychiatric/Sensory Disease	34	6	0 - 40	44	0	0 - 23
Urologic Disease	48	6	0 - 28	51	4	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	142
Occupancy Rate (%):	43
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	32
Percent of Physicians Who Are Board Certified Specialists:	53
Interns and Residents:	0
Registered Nurses:	67
Licensed Practical Nurses:	22

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

RIVERSIDE MEDICAL CENTER

350 N WALL ST
KANKAKEE, IL 60901

Medicare Hospital Provider Number: 140186

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,624	13	10 - 14	1,539	12	9 - 14
Cancer	57	53	24 - 53	50	40	31 - 60
Cerebrovascular Accidents	57	30	19 - 44	77	22	17 - 38
Gastrointestinal Catastrophes	10	0	16 - 53	8	13	7 - 61
Infectious Disease	13	15	14 - 57	11	45	13 - 68
Metabolic/Electrolyte Disorders	25	32	14 - 53	23	30	16 - 56
Pulmonary Disease	61	33	15 - 40	66	32	18 - 43
Renal Failure	3	67	7 - 90	2	100	6 - 91
Severe Acute Heart Disease	73	47	29 - 53	44	45	30 - 60
Severe Chronic Heart Disease	91	29	15 - 34	66	32	14 - 38
Severe Trauma	3	33	1 - 90	2	50	1 - 93
Gastrointestinal Disease	129	4	0 - 11	133	4	1 - 10
Gynecologic Disease	14	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	214	2	2 - 6	194	3	2 - 7
Musculoskeletal/Skin Conditions	158	4	0 - 11	178	3	1 - 8
Neuropsychiatric/Sensory Disease	70	3	0 - 27	53	2	0 - 25
Urologic Disease	76	1	0 - 22	67	3	0 - 22

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	307
Occupancy Rate (%):	61
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	115
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	217
Licensed Practical Nurses:	18

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

ROCHELLE COMMUNITY HOSPITAL

900 N 2ND ST
ROCHELLE, IL 61068

Medicare Hospital Provider Number: 140038

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	299	14	8 - 17	291	15	10 - 19
Cancer	3	33	2 - 86	8	38	15 - 75
Cerebrovascular Accidents	16	31	12 - 57	15	40	11 - 58
Gastrointestinal Catastrophes	1	100	2 - 97	3	0	5 - 79
Infectious Disease	1	0	1 - 97	2	100	6 - 90
Metabolic/Electrolyte Disorders	9	22	5 - 62	6	67	9 - 76
Pulmonary Disease	16	25	7 - 51	14	36	10 - 58
Renal Failure	1	0	1 - 97	3	33	7 - 90
Severe Acute Heart Disease	14	57	23 - 71	22	41	21 - 61
Severe Chronic Heart Disease	16	31	7 - 52	12	25	8 - 57
Severe Trauma	0	-	-	1	0	2 - 97
Gastrointestinal Disease	26	4	0 - 52	31	0	1 - 17
Gynecologic Disease	9	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	34	6	0 - 37	29	7	0 - 54
Musculoskeletal/Skin Conditions	30	0	0 - 22	17	6	0 - 77
Neuropsychiatric/Sensory Disease	5	0	0 -100	7	0	0 -100
Urologic Disease	12	17	0 -100	9	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	42
Occupancy Rate (%):	38
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	8
Percent of Physicians Who Are Board Certified Specialists:	38
Interns and Residents:	0
Registered Nurses:	32
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ROCKFORD MEMORIAL HOSPITAL

2400 NORTH ROCKTON AVENUE
ROCKFORD, IL 61103

Medicare Hospital Provider Number: 140239

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,968	12	10 - 14	3,078	13	10 - 14
Cancer	118	41	28 - 51	115	46	29 - 52
Cerebrovascular Accidents	91	32	18 - 39	100	27	18 - 37
Gastrointestinal Catastrophes	31	32	16 - 53	20	40	21 - 65
Infectious Disease	40	35	20 - 52	35	31	20 - 54
Metabolic/Electrolyte Disorders	43	30	14 - 47	35	14	15 - 44
Pulmonary Disease	121	25	16 - 35	114	21	19 - 37
Renal Failure	35	29	14 - 62	19	58	17 - 73
Severe Acute Heart Disease	129	42	29 - 48	136	42	30 - 49
Severe Chronic Heart Disease	123	17	15 - 30	137	23	15 - 31
Severe Trauma	6	0	7 - 60	9	22	6 - 64
Gastrointestinal Disease	196	3	2 - 8	196	3	1 - 7
Gynecologic Disease	27	0	0 -100	27	4	0 -100
Low-Risk Heart Disease	364	4	2 - 7	329	6	1 - 7
Musculoskeletal/Skin Conditions	337	2	1 - 6	367	2	1 - 5
Neuropsychiatric/Sensory Disease	109	3	0 - 12	111	3	0 - 12
Urologic Disease	106	4	0 - 18	88	0	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	366
Occupancy Rate (%):	74
Ownership/Control:	Private, Non-profit

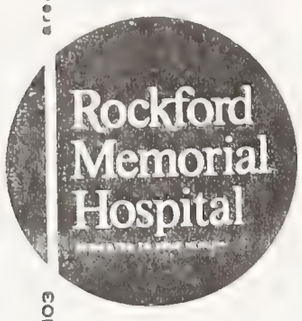
STAFFING

Total Number of Physicians:	154
Percent of Physicians Who Are Board Certified Specialists:	84
Interns and Residents:	0
Registered Nurses:	350
Licensed Practical Nurses:	40

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

2400 NORTH ROCKTON AVENUE • ROCKFORD, ILLINOIS 61103 area code 815/968-6861



October 19, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau
Health Care Financing Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Rockford Memorial Hospital, Rockford, Illinois, (Medicare Provider Number 14-0239) is in receipt of the HCFA selected mortality data for Medicare patients during calendar year 1987 and the revised data for calendar year 1986 as distributed to us with Dr. Roper's communication of September 15, 1988.

Although the mortality data reported for Rockford Memorial Hospital in each individual category and overall falls well within the predicted range, we do feel it appropriate to offer some comments and appreciate the opportunity to do so.

A phone conversation with Ms. Susan Smith of your office has already addressed the fact that the hospital characteristics information for Rockford Memorial was significantly flawed and thus, understandably, raised question as to the validity of other information. We understand that such was a common problem and that revised information based on 1987 AHA data will be utilized in the final release with certain information expressed in a different format. Enclosed as attachments A and B are hospital characteristic data for the 1986 and 1987 years respectively - data taken directly from our AHA Survey submissions and expressed in the format which Ms. Smith indicated would be utilized by the Bureau. We hope that this information will be helpful to you.

A second concern relates to the fact that the 1986 data reported to us has been recomputed on the basis of the format employed for implementation of the 1987 mortality data release. We understand the desire of the Bureau to standardize the approach but believe that such a revision would be much more useful to support the quality assurance efforts of the individual hospital had we been supplied with the patient listing involved. Without such a list, our efforts to thoroughly examine these cases is severely hampered in terms of verifying the validity of the report and more importantly, examining each case to

assure ourselves of the quality performance of this institution.

Additionally, we would find it most helpful in terms of future mortality data reports to have assistance in identifying cause of death for those deaths which occur post discharge and outside the hospital setting. We would inquire as to the possibility of gaining the Bureau's assistance in obtaining and providing such information as an integral part of the HCFA annual release to the individual hospital for review.

Finally, we would respectfully call your attention to an additional error in the report submitted for Rockford Memorial Hospital. There were two cases from the HCFA Patient List provided Rockford Memorial which were placed in wrong categories according to your Table 1 which defines the Diagnostic Categories by ICD-9-CM code. Those cases are detailed in Attachment C (Memorandum dated October 17, 1988 from Ms. Linda Hickey, Associate Director, Medical Record Department.)

Thank you for providing us with the mortality data for Rockford Memorial Hospital and for welcoming and publishing our comments. Institutionally, we continue to support efforts to develop accurate and meaningful information that will enlighten both the public and those who provide healthcare about the task of delivering and monitoring quality healthcare outcomes.

Most Sincerely,

H. W. Maysent
President

Attachments 3

ROSELAND COMMUNITY HOSPITAL

45 W 111TH STREET
CHICAGO, IL 60628

Medicare Hospital Provider Number: 140068

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	622	16	10 - 16	641	16	10 - 16
Cancer	8	38	9 - 70	14	43	26 - 75
Cerebrovascular Accidents	39	38	16 - 47	36	33	12 - 44
Gastrointestinal Catastrophes	5	20	3 - 75	4	50	6 - 83
Infectious Disease	15	40	13 - 61	8	63	14 - 74
Metabolic/Electrolyte Disorders	15	40	7 - 57	23	22	11 - 49
Pulmonary Disease	24	29	19 - 56	17	12	13 - 48
Renal Failure	2	100	6 - 90	1	100	1 - 97
Severe Acute Heart Disease	31	29	26 - 58	38	61	27 - 58
Severe Chronic Heart Disease	15	33	7 - 54	27	41	9 - 46
Severe Trauma	1	0	0 -100	1	0	0 - 99
Gastrointestinal Disease	34	6	0 - 44	39	5	0 - 32
Gynecologic Disease	2	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	96	4	1 - 12	93	3	1 - 12
Musculoskeletal/Skin Conditions	30	0	0 - 36	50	8	0 - 64
Neuropsychiatric/Sensory Disease	19	5	0 - 95	19	0	0 - 67
Urologic Disease	9	0	0 -100	9	11	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	168
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	57
Percent of Physicians Who Are Board Certified Specialists:	53
Interns and Residents:	0
Registered Nurses:	120
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ROSELAND COMMUNITY HOSPITAL ASSOCIATION
45 WEST 111th STREET • CHICAGO, ILLINOIS 60628 • (312) 995-3000
Medicare Provider #14-0068

October 21, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: W. L. Roper, M.D.

Dear Doctor Roper:

Outcome, in and of itself, is not a measure of the quality of care provided at a particular institution. You have stated, "... the information by itself is not a complete measure of the quality of care at an individual hospital." Yet, now in its third publication, your agency insists on utilizing mortality rates to establish an implied link between this statistic and the quality of care rendered.

The flaws in this methodology are innumerable.

- First and foremost, your statistical measure does not provide for the patient's severity of illness. Coexisting or complicating conditions are not considered in your calculations.
- Focusing on only one payor class within an institution is not representative of the entire hospital population. Additionally, this payor class is comprised of the most elderly and most often, the more serverly ill patient.
- Including cases in your data collection that fall within 30-days post admission allows inclusion of deaths in the hospital-specific mortality rates for totally unrelated conditions. It is misleading to include deaths which are unrelated to the diagnostic category for which the patient had been treated. What is the value, for example, in listing a patient with a treatment plan tailored towards recovery from an acute myocardial infarction, when his subsequent death was caused by an auto accident fatality.
- The HCFA mortality rate excludes all admissions except for the last admission. Therefore, a patient who may have been admitted numerous times will only be counted on his last admission, excluding all prior admissions at which time he had been discharged alive and well.

- In our particular data, the sole category in which we exceed your predicted range, only two patients are reflected. Since both patients expired our "actual mortality rate" is 100%. This sampling size is much too small to be of any value in measuring quality of care. In addition, both patients had several coexisting conditions which no doubt contributed to their demise. This information is not considered by your statistic.

Mortality rates are a monitoring tool. They are not an indication of the quality of care rendered. Quality of care can only be assessed by reviewing all parameters of a particular admission and the subsequent treatment plan.

We here, at Roseland Community Hospital, have an on-going quality assurance program which examines and evaluates all expirations at our institution. We have recently started an observation unit and a pediatric urgent care unit as extensions of our emergency room services.

We view these types of programs as a measure of the quality of care that we provide to our community and patients.

Quality of care cannot be measured in a statistic. The funds used to research and produce a publication of this magnitude could be better allocated by our federal government to provide additional hospital-based programs to the community rather than this meaningless measure of the quality of care.

Respectfully submitted,

Denise R. Williams

Denise R. Williams
President

DRW/hf

RUSH NORTH SHORE MEDICAL CENTER

9600 GROSS POINT ROAD
SKOKIE, IL 60076

Medicare Hospital Provider Number: 140051

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,541	14	11 - 16	1,487	14	11 - 16
Cancer	40	47	29 - 61	40	45	28 - 61
Cerebrovascular Accidents	55	33	17 - 42	51	29	17 - 43
Gastrointestinal Catastrophes	14	21	16 - 62	8	75	7 - 67
Infectious Disease	36	47	21 - 56	37	41	24 - 59
Metabolic/Electrolyte Disorders	23	30	13 - 54	25	16	10 - 45
Pulmonary Disease	94	38	20 - 42	82	28	21 - 43
Renal Failure	11	45	18 - 80	7	57	13 - 82
Severe Acute Heart Disease	62	40	27 - 53	86	47	31 - 54
Severe Chronic Heart Disease	97	26	17 - 36	88	23	15 - 34
Severe Trauma	3	33	4 - 86	3	0	2 - 80
Gastrointestinal Disease	113	7	1 - 14	77	1	1 - 10
Gynecologic Disease	4	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	167	4	1 - 9	160	4	1 - 9
Musculoskeletal/Skin Conditions	206	1	1 - 5	219	3	1 - 7
Neuropsychiatric/Sensory Disease	38	5	0 - 27	40	2	0 - 54
Urologic Disease	76	5	0 - 28	62	0	1 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	218
Occupancy Rate (%):	58
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	129
Percent of Physicians Who Are Board Certified Specialists:	88
Interns and Residents:	0
Registered Nurses:	209
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

RUSH-PRESBYTERIAN-ST LUKES MED CTR

1653 WEST CONGRESS PARKWAY
CHICAGO, IL 60612

Medicare Hospital Provider Number: 140119

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,601	9	10 - 13	4,522	8	9 - 13
Cancer	255	31	33 - 51	204	33	30 - 49
Cerebrovascular Accidents	99	22	19 - 37	98	18	18 - 36
Gastrointestinal Catastrophes	55	27	17 - 46	48	19	21 - 49
Infectious Disease	44	39	22 - 54	36	39	24 - 59
Metabolic/Electrolyte Disorders	57	23	13 - 42	46	20	12 - 41
Pulmonary Disease	187	24	20 - 36	158	27	20 - 37
Renal Failure	61	16	7 - 53	53	11	6 - 54
Severe Acute Heart Disease	89	25	28 - 49	142	36	32 - 50
Severe Chronic Heart Disease	194	18	17 - 30	171	16	17 - 31
Severe Trauma	4	25	4 - 80	6	0	8 - 61
Gastrointestinal Disease	246	3	2 - 7	240	1	1 - 6
Gynecologic Disease	47	0	0 - 84	38	0	0 - 90
Low-Risk Heart Disease	635	4	2 - 6	644	3	2 - 6
Musculoskeletal/Skin Conditions	473	0	1 - 4	468	1	1 - 4
Neuropsychiatric/Sensory Disease	356	2	1 - 6	397	3	1 - 6
Urologic Disease	190	2	0 - 7	227	1	1 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	1,072
Occupancy Rate (%):	74
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	744
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

RUSH-PRESBYTERIAN-ST. LUKE'S MEDICAL CENTER 1653 WEST CONGRESS PARKWAY, CHICAGO, ILLINOIS 60612



LEO M. HENIKOFF, M.D.
PRESIDENT

TO: Health Standards & Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

DATE: October 20, 1988

Rush-Presbyterian-St. Luke's Medical Center (Medicare Provider #140119) has reviewed the Health Care Financing Administration's statistics about deaths of Medicare beneficiaries whose last hospital discharges were from our institution during Calendar 1987. We have found the statistics to be in the lower ranges of "expected" mortality rates, as they were in 1986. We have used this grouping of data as an opportunity to reexamine specific cases in various disease categories, and this review, referenced below, continues to demonstrate the high quality of care provided by Rush.

Rush-Presbyterian-St. Luke's is an Illinois not-for-profit corporation organized exclusively for charitable, scientific and educational purposes and governed by a voluntary Board of Trustees. Because Rush is an academic tertiary care medical center, its mix of Medicare patients requires we be one of the most resource-intensive institutions in Illinois. We provide state-of-the-art care in many areas, including cardiovascular disease, cancer, transplantation, orthopedics, neurology and geriatric medicine, to name a few.

While our mortality rate changed little from last year, we took the opportunity to evaluate those disease categories in which there was a change in the mortality rate. The absolute number of deaths in these categories was low. In addition, we performed intensive peer review--using our established peer review process--of the four disease categories which HCFA defined as contributing disproportionately to National Mortality figures: AMI, CHF, Pneumonia, and Stroke. Upon review of all of these cases, we found no patterns of poor quality care.

-more-

It must be emphasized that the absence of negative findings during our mortality review does not satisfy our commitment to the delivery of high quality patient care services. Our Quality Assurance Program oversees many review mechanisms. These include, but are not limited to, infection control, drug therapy, blood usage and surgical case reviews. In addition, each clinical department has developed specific parameters to evaluate care rendered to all patients admitted under the service.

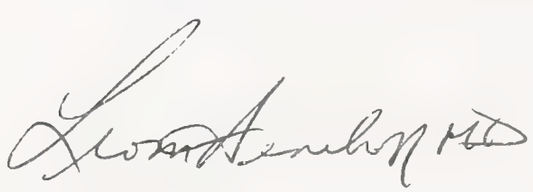
Our study last year of the mortality data specific to our institution revealed no major problems with the quality of care or the treatment rendered. The ongoing morbidity/mortality review process by our clinical departments incorporated the output of that clinical peer review.

Although this year's data were highly verifiable, the meaning of these data remains open to interpretation. Death, viewed in isolation, is not a measure of the quality of hospital care or of hospital performance. The limited inferential value of the statistical models employed to date must be recognized when reviewing mortality rates and their respective "expected" ranges. Further refinement of disease categories on the basis of the presence or absence of co-morbidities and/or complications would narrow the ranges of expected death rates. However, this would diminish still further, the size of the sample in each category, and therefore diminish the significance of the associated rate of death.

Comparisons between principal diagnoses, listed in claims data, and the cause of the death on the death certificate might provide an effective quality sentinel. However, nothing will replace the professional commitment exemplified by clinical review, and the management of the outcomes of such reviews by a systematic quality assurance program which identifies patterns of care which may be improved by education or other interventions.

We wish to note that the changes in the format of the raw data have been most helpful. Unfortunately, dividing all discharges by disease category made specific cross-referencing to our computerized data files very cumbersome. A list of all mortalities ranked by medical record number would be a very helpful addendum to the data provided next year.

Finally, we believe that the care provided by Rush-Presbyterian-St. Luke's Medical Center is of very high quality. The publication of mortality data by HCFA is a continuing incentive to examine our case management at the macro level and is valuable. We continue to assert, nevertheless, that HCFA must find a methodology which explains to the lay public--persons who are neither statisticians nor involved with the delivery of health care--the reason for the publication of these data and the very limited value these data, as such, have in helping the public determine where quality care is provided.



Leo M. Henikoff, M.D.
President

SANDWICH COMMUNITY HOSP

11 PLEASANT AVE
SANDWICH, IL 60548

Medicare Hospital Provider Number: 140203

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	463	11	8 - 15	441	13	8 - 16
Cancer	4	50	5 - 82	4	100	6 - 71
Cerebrovascular Accidents	23	4	17 - 40	16	25	12 - 55
Gastrointestinal Catastrophes	8	25	8 - 67	5	20	8 - 76
Infectious Disease	1	0	1 - 97	3	33	4 - 86
Metabolic/Electrolyte Disorders	8	50	3 - 69	16	13	7 - 47
Pulmonary Disease	21	19	9 - 45	30	27	12 - 45
Renal Failure	1	100	3 - 99	1	0	3 - 99
Severe Acute Heart Disease	24	42	22 - 61	17	47	20 - 65
Severe Chronic Heart Disease	23	22	12 - 47	14	21	7 - 52
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	67	6	0 - 20	43	5	1 - 21
Gynecologic Disease	1	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	47	4	0 - 27	47	2	0 - 18
Musculoskeletal/Skin Conditions	37	3	1 - 22	41	0	0 - 15
Neuropsychiatric/Sensory Disease	6	0	0 -100	13	0	0 -100
Urologic Disease	25	4	0 - 87	19	0	0 - 97

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	53
Occupancy Rate (%):	47
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	11
Percent of Physicians Who Are Board Certified Specialists:	55
Interns and Residents:	0
Registered Nurses:	37
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SARAH BUSH LINCOLN HEALTH CENTER

ROUTE 16 P O BOX 372
MATTOON, IL 61938

Medicare Hospital Provider Number: 140189

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,757	11	9 - 13	1,755	11	9 - 14
Cancer	35	34	25 - 58	39	54	25 - 58
Cerebrovascular Accidents	88	31	19 - 40	72	28	19 - 41
Gastrointestinal Catastrophes	18	33	19 - 63	22	32	16 - 57
Infectious Disease	14	21	16 - 61	22	32	15 - 55
Metabolic/Electrolyte Disorders	24	21	13 - 50	18	17	6 - 47
Pulmonary Disease	85	20	15 - 35	87	16	15 - 34
Renal Failure	5	100	15 - 77	6	50	11 - 83
Severe Acute Heart Disease	61	51	28 - 54	80	32	28 - 51
Severe Chronic Heart Disease	103	19	15 - 32	102	21	15 - 33
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	165	3	1 - 8	169	4	1 - 9
Gynecologic Disease	10	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	188	3	1 - 7	171	2	2 - 7
Musculoskeletal/Skin Conditions	197	4	1 - 9	212	1	1 - 5
Neuropsychiatric/Sensory Disease	127	2	0 - 15	137	4	0 - 17
Urologic Disease	132	2	0 - 9	93	3	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	172
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	64
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	160
Licensed Practical Nurses:	25

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Sarah Bush Lincoln Health Center
Mattoon, Illinois

Provider Number: 14-0189

The hospital's comments consisted primarily of annotations to the patient specific information and/or the hospital characteristics generated by the Health Care Financing Administration and provided to the hospital. We did not publish this annotated information.

SARAH D CULBERTSON MEMORIAL HOSPITAL

238 S CONGRESS
RUSHVILLE, IL 62681

Medicare Hospital Provider Number: 140003

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	418	17	13 - 21	487	16	11 - 18
Cancer	13	69	20 - 69	13	69	28 - 77
Cerebrovascular Accidents	18	22	10 - 50	27	26	15 - 48
Gastrointestinal Catastrophes	2	50	3 - 92	0	-	-
Infectious Disease	6	33	7 - 74	4	50	10 - 86
Metabolic/Electrolyte Disorders	13	15	4 - 52	9	33	8 - 66
Pulmonary Disease	50	26	18 - 44	41	15	17 - 41
Renal Failure	2	100	7 - 92	3	67	9 - 91
Severe Acute Heart Disease	31	48	27 - 62	15	60	24 - 71
Severe Chronic Heart Disease	36	22	16 - 44	37	38	12 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	34	6	0 - 41	33	0	0 - 25
Gynecologic Disease	3	0	0 -100	0	-	-
Low-Risk Heart Disease	45	9	0 - 41	59	2	1 - 13
Musculoskeletal/Skin Conditions	23	9	0 - 66	48	2	0 - 32
Neuropsychiatric/Sensory Disease	9	0	0 -100	20	0	0 - 49
Urologic Disease	11	0	0 - 95	2	50	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	70
Occupancy Rate (%):	57
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	10
Percent of Physicians Who Are Board Certified Specialists:	50
Interns and Residents:	0
Registered Nurses:	19
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SAUNDERS HOSPITAL

700 W WOODS ST
AVON, IL 61415

Medicare Hospital Provider Number: 140216

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	19	16	7 - 43	55	22	10 - 32
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	2	0	6 - 90	2	0	3 - 88
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	1	100	3 - 99
Metabolic/Electrolyte Disorders	1	0	1 - 97	0	-	-
Pulmonary Disease	1	0	0 - 99	6	50	12 - 79
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	1	100	0 -100
Severe Chronic Heart Disease	3	33	1 - 87	3	33	6 - 87
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	2	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	3	0	0 - 98	10	10	1 - 61
Musculoskeletal/Skin Conditions	0	-	-	4	0	0 - 91
Neuropsychiatric/Sensory Disease	1	0	0 -100	2	0	0 -100
Urologic Disease	1	0	0 -100	4	0	0 - 85

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	20
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	7
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SAVANNA CITY HOSPITAL

1125 N FIFTH ST
SAVANNA, IL 61074

Medicare Hospital Provider Number: 140229

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	164	19	11 - 24	121	23	13 - 28
Cancer	2	100	5 - 89	2	50	4 - 93
Cerebrovascular Accidents	5	60	7 - 78	4	50	8 - 84
Gastrointestinal Catastrophes	0	-	-	1	100	2 - 98
Infectious Disease	3	0	11 - 84	0	-	-
Metabolic/Electrolyte Disorders	7	29	1 - 74	1	0	0 -100
Pulmonary Disease	24	25	13 - 49	14	43	8 - 58
Renal Failure	3	67	12 - 94	5	80	20 - 93
Severe Acute Heart Disease	10	40	16 - 71	6	33	12 - 78
Severe Chronic Heart Disease	12	42	5 - 59	16	44	11 - 58
Severe Trauma	1	100	1 - 97	0	-	-
Gastrointestinal Disease	15	0	0 - 60	3	33	0 -100
Gynecologic Disease	2	0	0 -100	0	-	-
Low-Risk Heart Disease	16	6	0 - 59	10	0	0 - 73
Musculoskeletal/Skin Conditions	12	17	0 - 99	12	0	0 - 89
Neuropsychiatric/Sensory Disease	3	33	0 -100	1	0	0 -100
Urologic Disease	2	0	0 -100	2	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	34
Occupancy Rate (%):	21
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	9
Percent of Physicians Who Are Board Certified Specialists:	22
Interns and Residents:	0
Registered Nurses:	9
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SAVANNA CITY HOSPITAL

October 13, 1988

Health Standards and Quality Bureau, HCFA
Attn: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

I am writing in response to your communication of September 15, 1988, regarding mortality statistics. We have carefully checked the information you relayed to us and find them to be very accurate. I have shared this information with all concerned departments as well as our Medical Staff.

As you are probably well aware, the limited number of patients in several categories really does not give an accurate sample of cases treated here in our hospital.

Savanna City Hospital is quite small and at the present time all our records are compiled manually. We do not have a computer to do our compilations and therefore cannot make use of the MMPS program. However, should we go to a computer, we will certainly consider using MMPS.

Very truly yours,

Martha J. Stretton

Martha J. Stretton
Interim Administrator
SAVANNA CITY HOSPITAL

MJS:anm

SHELBY MEMORIAL HOSPITAL

200 S CEDAR ST
SHELBYVILLE, IL 62565

Medicare Hospital Provider Number: 140019

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	503	9	11 - 17	493	10	12 - 18
Cancer	1	100	1 - 97	9	89	26 - 74
Cerebrovascular Accidents	25	20	24 - 56	24	13	24 - 53
Gastrointestinal Catastrophes	1	100	1 - 97	2	50	6 - 95
Infectious Disease	1	100	2 - 97	5	40	15 - 86
Metabolic/Electrolyte Disorders	15	0	11 - 41	12	8	11 - 53
Pulmonary Disease	50	12	17 - 38	44	20	16 - 43
Renal Failure	4	50	11 - 89	5	60	15 - 89
Severe Acute Heart Disease	11	55	25 - 79	11	45	24 - 78
Severe Chronic Heart Disease	34	24	14 - 43	44	7	15 - 33
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	51	4	1 - 18	37	0	1 - 14
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	65	0	2 - 9	82	4	1 - 12
Musculoskeletal/Skin Conditions	63	0	2 - 9	37	3	1 - 22
Neuropsychiatric/Sensory Disease	21	0	0 - 44	18	0	0 - 34
Urologic Disease	6	17	0 - 95	7	0	0 - 86

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	51
Occupancy Rate (%):	51
Ownership/Control:	Private, Non-profit

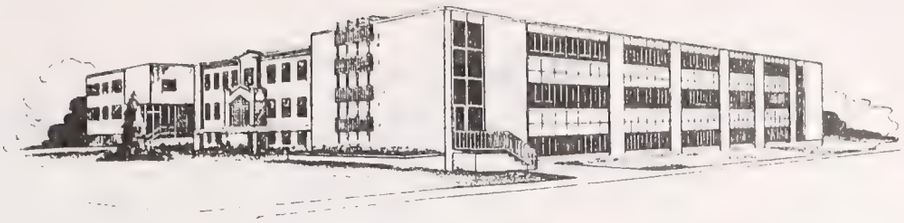
STAFFING

Total Number of Physicians:	9
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	27
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GARLAND STROHL
Administrator



SHELBY MEMORIAL HOSPITAL
SOUTH FIRST AND CEDAR STREET • SHELBYVILLE, ILLINOIS 62565

September 21, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Sandra Kappert

In re: 14-0019

Dear Mrs. Kappert:

Referencing our motality rates for 1987, we acknowledge the percentages are above the predicted rate in 3 categories. In each of these, we had 1 patient only and in all cases the patient was 83 years of age or older. Death was not unexpected, and although certainly significant, this should not appear as a reflection on our quality of care.

The calendar year 1986 also indicates a higher than expected mortality rate for the category of cancer. Eight deaths occurred in nine patients treated, but again we add that all were aged and had prior poor prognosis before admission and each death was predictable.

Respectfully,

SHELBY MEMORIAL HOSPITAL

Garland Strohl

Garland Strohl,
Administrator

GS:nm

SHERMAN HOSPITAL

934 CENTER STREET
ELGIN, IL 60120

Medicare Hospital Provider Number: 140030

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,249	13	10 - 14	2,291	12	9 - 13
Cancer	62	56	28 - 55	57	56	31 - 60
Cerebrovascular Accidents	95	29	18 - 37	92	29	19 - 39
Gastrointestinal Catastrophes	16	19	18 - 60	19	37	15 - 59
Infectious Disease	30	33	20 - 56	33	27	21 - 55
Metabolic/Electrolyte Disorders	22	36	14 - 56	36	44	14 - 50
Pulmonary Disease	105	27	19 - 38	82	17	14 - 34
Renal Failure	14	57	8 - 68	14	43	20 - 79
Severe Acute Heart Disease	98	39	28 - 49	79	46	27 - 50
Severe Chronic Heart Disease	136	24	14 - 30	132	27	14 - 31
Severe Trauma	4	50	2 - 83	7	14	7 - 66
Gastrointestinal Disease	168	5	1 - 10	154	5	1 - 11
Gynecologic Disease	28	7	0 -100	21	0	0 -100
Low-Risk Heart Disease	388	6	2 - 7	364	4	2 - 7
Musculoskeletal/Skin Conditions	250	4	1 - 7	276	1	1 - 5
Neuropsychiatric/Sensory Disease	54	2	0 - 23	58	2	0 - 28
Urologic Disease	77	0	0 - 11	79	1	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

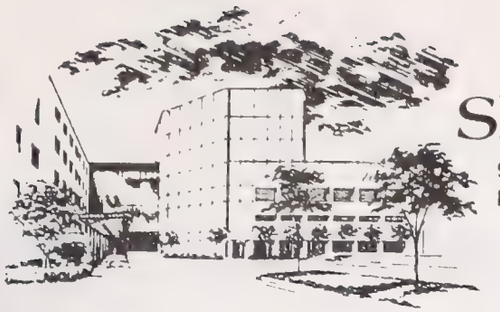
Total Beds (#):	342
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	230
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	0
Registered Nurses:	295
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No



Sherman Hospital

934 Center Street / Elgin, Illinois 60120-9976
Phone: 312/742-9800

PROVIDER NO. 140030

Data Verification

The data released by HCFA indicates that a total of 2,249 Medicare patients were included in the sample.

Of the 283 deaths attributed by HCFA to Sherman Hospital, 60, or 21%, occurred after discharge. This 21% may or may not bear any relationship to the hospital stay or treatment.

Our own records indicate that 3,581 Medicare admissions occurred in 1987. After subtracting multiple admissions of individual beneficiaries, the total sample size is 2,564 compared to HCFA's 2,249. We have verified the hospital data, but are unable to verify HCFA's data, particularly as it relates to the deaths after discharge. Additionally, without detailed information concerning the billing data available to HCFA in computing the predicted mortality rate, it is not possible to verify the accuracy of the information submitted to HCFA.

Relying, therefore, on our own data, the actual mortality rate, all causes, is 11% and not 13% as HCFA published. The actual mortality rate, all causes, excluding deaths outside the hospital is 8.6%.

The following information related to Hospital Characteristics was taken from the 1987 AHA Survey and should be consistent with the HCFA release:

Beds (#):	Licensed (excluding basinettes)	418
Occupancy Rate (%):	Licensed Beds	53%
	Staffed Beds	65%
Ownership/Control:	Private, Non-Profit	

Staffing:

Total number of physicians:	230	Attending & Associate Attending Only
Percent of physicians who are Board Certified Specialists:	65%	
Interns and Residents Per Bed:	0.00	
Registered Nurses Per Staffed Bed:	.86	
Licensed Practical Nurses Per Staffed Bed:	.03	

Specialty Services:

Shock/Trauma or Burn Unit:	Yes
Coronary Care Unit:	Yes
Open Heart Surgery:	Yes
Angioplasty:	Yes
Organ Transplant Service:	No
Hospice Care:	No
Kidney Dialysis:	Yes

Interpretive Remarks

While Sherman Hospital's mortality rate due to all causes falls within the range of predicted mortality rates, we offer the following observations regarding the data in general:

1. No allowance has been made for severity of illness within diagnostic category. That is, a patient may have multiple medical problems with several complicating factors where death is the anticipated outcome.

2. The data contained in the HCFA release is not a measure of quality of care. It is information based on a probability model and not established fact. HCFA used a statistical method for arriving at estimates of "expected mortality" based on certain selected patient characteristics, and then compared these estimates with actual mortality. The model does not consider all factors that influence the risk of death. Significant deviations from the predicted rate could be the result of differences in the type of patients admitted.

3. By measuring mortality within 30 days of a hosptial admission, there is no way to fairly assess the quality of hospital care using mortality rates of patients who died from causes which may be unrelated to their hospital stay. Quality judgments can only be made after reviewing the information contained in a patient's medical record.

4. Sherman Hospital provides specialized treatment for patients in five of the sixteen diagnostic categories. Our cardiac diagnostic center including heart catheterizations, coronary angioplasty and open heart surgery, as well as our renal disease center, are well known throughout the area we serve. We continue to treat patients who are of a higher risk classification. Consequently, somewhat higher mortality rates in those categories are to be expected in our institution as compared to other facilities which do not provide those services.

5. In the diagnostic category, cancer, 62 cases were attributed to Sherman Hospital with 35 deaths which placed the hospital one percentage point outside the range for predicted mortality. While the actual mortality rate computed by HCFA was identical in 1986 and 1987, the range in 1986 was 31% - 60%, but in 1987 was 28% - 55%. Twenty-seven (27) deaths occurred while the patient was hospitalized with an additional eight (8) deaths occurring after discharge in this category. It is important to note the small sample size. Of even greater importance, our evaluation showed that ten (10) of the 27 patients were over the age of 80 and that sixteen (16) were on supportive care orders only during the terminal phase of illness. Supportive care means no heroic measures are to be taken to support life.

6. At Sherman Hospital quality is of the utmost concern to the Board, the Medical Staff and Management of the hospital. Under the hospital Quality Assurance program every patient is reviewed to make certain the care given is appropriate. Numerous clinical indicators are utilized to perform these reviews, some of which are mortality, infection rates, surgical complications, readmissions, etc. The 1987 mortality data released by HCFA will be studied and used as a tool to assist the hospital in its ongoing assessment of the quality of patient care provided.

SILVER CROSS HOSP

1200 MAPLE RD
JOLIET, IL 60432

Medicare Hospital Provider Number: 140213

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,906	13	11 - 15	1,956	13	10 - 15
Cancer	60	47	30 - 58	62	53	33 - 60
Cerebrovascular Accidents	79	34	16 - 38	67	28	17 - 40
Gastrointestinal Catastrophes	22	55	19 - 62	14	50	20 - 70
Infectious Disease	31	35	19 - 55	14	43	15 - 65
Metabolic/Electrolyte Disorders	46	24	15 - 45	34	38	11 - 47
Pulmonary Disease	123	34	17 - 37	131	30	18 - 37
Renal Failure	7	71	19 - 86	14	79	24 - 80
Severe Acute Heart Disease	55	31	25 - 51	64	36	26 - 51
Severe Chronic Heart Disease	99	23	16 - 34	114	24	16 - 34
Severe Trauma	1	0	0 - 99	3	0	3 - 79
Gastrointestinal Disease	152	2	2 - 8	162	1	2 - 6
Gynecologic Disease	15	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	271	1	2 - 6	292	2	2 - 6
Musculoskeletal/Skin Conditions	158	3	1 - 9	177	3	0 - 9
Neuropsychiatric/Sensory Disease	76	1	0 - 14	91	3	1 - 13
Urologic Disease	69	0	1 - 8	73	1	0 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	276
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	216
Percent of Physicians Who Are Board Certified Specialists:	80
Interns and Residents:	0
Registered Nurses:	260
Licensed Practical Nurses:	26

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

SOUTH CHICAGO COMM HOSP

2320 E 93RD ST
CHICAGO, IL 60617

Medicare Hospital Provider Number: 140048

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,879	11	9 - 14	1,939	11	10 - 15
Cancer	46	48	25 - 56	51	45	26 - 56
Cerebrovascular Accidents	75	29	17 - 38	83	33	19 - 40
Gastrointestinal Catastrophes	13	15	15 - 59	14	36	13 - 62
Infectious Disease	35	40	24 - 59	27	33	25 - 63
Metabolic/Electrolyte Disorders	30	27	14 - 50	33	24	12 - 46
Pulmonary Disease	67	25	14 - 38	85	26	15 - 36
Renal Failure	16	19	15 - 68	7	29	7 - 76
Severe Acute Heart Disease	61	52	27 - 53	99	41	30 - 52
Severe Chronic Heart Disease	154	20	16 - 31	158	20	15 - 30
Severe Trauma	1	0	0 - 98	4	0	2 - 73
Gastrointestinal Disease	140	2	1 - 8	148	3	1 - 8
Gynecologic Disease	8	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	305	2	2 - 6	271	1	2 - 6
Musculoskeletal/Skin Conditions	203	3	0 - 8	181	2	0 - 7
Neuropsychiatric/Sensory Disease	52	2	0 - 22	56	0	1 - 10
Urologic Disease	70	0	1 - 8	57	0	1 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	385
Occupancy Rate (%):	56
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	198
Percent of Physicians Who Are Board Certified Specialists:	62
Interns and Residents:	0
Registered Nurses:	302
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

South Chicago Community Hospital
2320 East 93rd Street
Chicago, Illinois 60617
312/978-2000

SCCH

ANALYSIS OF 1987 HCFA MORTALITY DATA

SOUTH CHICAGO COMMUNITY HOSPITAL acknowledges receipt of HCFA's 1987 mortality data. We have thoroughly reviewed both 1987 and 1986 data, which HCFA recomputed using the 1987 updated model. The mortality rates for the 16 diagnostic categories in the 1986 data did not change with the recomputation and were therefore not reevaluated. SOUTH CHICAGO COMMUNITY HOSPITAL'S actual 1987 mortality rates did not fall outside the predicted ranges for any of the 16 diagnostic-specific categories or the overall mortality category.

South Chicago Community Hospital also verified the hospital characteristics data against our response to the 1987 American Hospital Association Annual Survey. The characteristics released with the HCFA mortality data were not consistent with those submitted to the AHA. South Chicago Community Hospital has a mixed Intensive Care Unit / Coronary Care Unit. The "Beds and Utilization by Inpatient Service" Section of the AHA Survey requests bed size for a mixed ICU/CCU under item 7 and bed size for a separate CCU under item 8. It appears that only beds appearing in item 8 were included in the HCFA response.

South Chicago Community Hospital feels that mortality data can be appropriately used to guide or focus medical peer review. The decision was made to analyze categories where it appeared that the actual rate ranked higher than average in the predicted ranges.

After medical peer review, it was confirmed that the HCFA methodology was not able to account for several factors that contributed to the cause of death among patients with severe acute heart disease.

> A significant number of patients experienced cardiac arrest prior to arrival in the Emergency Department, and no resuscitation was performed at the scene of the initial arrest. Since appropriate life-sustaining measures were substantially delayed in those cases and the patients were unresponsive when they arrived in the Emergency Department, a favorable outcome was compromised.
>
> Additionally, many of the patients had advanced deterioration of multiple organ systems before hospitalization for the severe, acute cardiac event. Multiple organ failure combined with extensive heart damage suggests that death was highly probable. Three patients/patients' families requested no resuscitative measures be taken and/or refused diagnostic procedures and life-sustaining measures. South Chicago Community Hospital treated all patients with severe acute heart disease in an Intensive Care/Coronary Care Unit environment using appropriate monitoring and highly-skilled technical interventions as medically appropriate.

Finally, it was noted that in three instances, patients classified with severe acute heart disease did not have a heart disease problem, but actually succumbed to an unrelated disease. Due to coding conventions and the groupings HCFA has used for the severe acute heart disease category, severely debilitated patients who were admitted with sepsis and consequently died of septic shock are included in this category.

SOUTH CHICAGO COMMUNITY HOSPITAL acknowledges the value of using mortality statistics as a mechanism with which to screen clinical data and identify areas which warrant a more in-depth focussed review. However, as stated by the JCAHO and AHA, South Chicago Community Hospital also is aware that statistical indicators are not direct measures of quality. As demonstrated by the above analysis, any determination about actual quality of patient care can only be made as part of a case-oriented medical peer review process.

SOUTH SHORE HOSPITAL CORPORATION

8015 SOUTH CRANDON
CHICAGO, IL 60617

Medicare Hospital Provider Number: 140181

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	611	13	11 - 17	608	11	9 - 15
Cancer	19	37	24 - 67	22	36	21 - 62
Cerebrovascular Accidents	46	22	14 - 39	20	40	9 - 52
Gastrointestinal Catastrophes	5	100	11 - 68	1	0	1 - 97
Infectious Disease	5	20	5 - 74	9	44	14 - 73
Metabolic/Electrolyte Disorders	14	14	5 - 50	14	14	10 - 53
Pulmonary Disease	39	28	20 - 49	27	37	14 - 51
Renal Failure	5	0	9 - 72	7	29	13 - 80
Severe Acute Heart Disease	23	39	21 - 60	20	35	21 - 62
Severe Chronic Heart Disease	46	13	17 - 38	62	15	13 - 32
Severe Trauma	0	-	-	1	0	0 - 99
Gastrointestinal Disease	53	2	0 - 17	66	2	0 - 13
Gynecologic Disease	4	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	63	2	0 - 14	84	0	2 - 7
Musculoskeletal/Skin Conditions	44	2	0 - 39	50	2	0 - 30
Neuropsychiatric/Sensory Disease	8	0	0 -100	10	0	0 - 88
Urologic Disease	19	5	0 - 95	15	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	170
Occupancy Rate (%):	55
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	79
Percent of Physicians Who Are Board Certified Specialists:	51
Interns and Residents:	0
Registered Nurses:	86
Licensed Practical Nurses:	15

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SOUTH SUBURBAN HOSPITAL

17800 S KEDZIE AVE
HAZEL CREST, IL 60429

Medicare Hospital Provider Number: 140250

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,572	13	12 - 16	1,706	12	10 - 15
Cancer	52	31	31 - 59	63	32	29 - 55
Cerebrovascular Accidents	61	15	20 - 40	50	28	17 - 43
Gastrointestinal Catastrophes	10	50	8 - 66	14	57	13 - 63
Infectious Disease	41	46	23 - 56	29	31	20 - 56
Metabolic/Electrolyte Disorders	26	38	15 - 55	39	33	14 - 47
Pulmonary Disease	81	32	19 - 42	94	28	17 - 38
Renal Failure	4	50	12 - 90	7	43	6 - 76
Severe Acute Heart Disease	56	39	25 - 51	75	47	29 - 53
Severe Chronic Heart Disease	122	20	15 - 31	93	20	15 - 34
Severe Trauma	2	50	1 - 93	2	0	2 - 89
Gastrointestinal Disease	109	3	1 - 10	149	3	1 - 9
Gynecologic Disease	10	0	0 -100	16	0	0 - 97
Low-Risk Heart Disease	202	2	2 - 7	237	2	1 - 6
Musculoskeletal/Skin Conditions	181	4	1 - 9	181	1	1 - 5
Neuropsychiatric/Sensory Disease	27	4	0 - 48	39	3	0 - 29
Urologic Disease	56	0	0 - 11	66	6	0 - 41

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	217
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	251
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	128
Licensed Practical Nurses:	1

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

South
Suburban
Hospital

17800 South Kedzie Avenue
Hazel Crest, Illinois 60429

312/799-8000

October 17, 1988

William L. Roper, M.D.
Health Case Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Blvd.
Baltimore, MD 21207

Dear Dr. Roper:

We have reviewed the mortality data sent by the Health Care Financing Administration on September 15, 1988. We find the data to be correct with the exception of the following information. The Medicare beneficiaries listed below actually died while inpatients at South Suburban Hospital rather than on the day after discharge:

1) [redacted] Expired On [redacted]
2) Expired On
3) Expired On
4) Expired On
5) Expired On

The following patients died while inpatients but do not appear on HCFA's list:

1) [redacted] Expired On [redacted]
2) Expired On
3) Expired On

The following patient's date of death was listed incorrectly:

1) [redacted] Expired On [redacted]

The following patient is listed as having been discharged alive but did expire:

1) [redacted] Expired On [redacted]

We appreciate the format improvements in the data provided and hope that in the future, the patient's full last name will be provided and this year's higher error rate will be corrected.

While the ability of statistical mortality data to detect variations in the quality of care has not been demonstrated, South Suburban Hospital considers the HCFA data a useful input into its quality assessment system. Currently, South Suburban Hospital and its Medical Staff incorporate mortality review into the hospital-wide quality assurance program. Every mortality is reviewed on a case by case basis by a committee of physicians practicing in the appropriate specialty. When the committee identifies an opportunity for improvement in the quality of care, appropriate action is taken and the results are monitored to ensure that care is improved.

We look forward to the refinement of HCFA's model and the success of the Joint Commission's current efforts to produce statistical measurements of the patient care process and patient outcomes. We believe that identifying variations in such measures will prompt additional case review by our quality assessment groups, enabling continuous improvement in treatment options, individual practice and hospital systems.

Sincerely,

Robert Rutkowski
President

RR/cm

SPARTA COMMUNITY HOSP DISTRICT

818 E BROADWAY
SPARTA, IL 62286

Medicare Hospital Provider Number: 140109

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	322	14	9 - 17	332	12	10 - 18
Cancer	8	38	11 - 72	4	50	13 - 88
Cerebrovascular Accidents	14	21	11 - 55	20	30	14 - 54
Gastrointestinal Catastrophes	2	50	1 - 93	0	-	-
Infectious Disease	2	0	3 - 88	1	100	2 - 97
Metabolic/Electrolyte Disorders	15	13	8 - 50	9	11	14 - 63
Pulmonary Disease	20	25	11 - 50	28	18	11 - 42
Renal Failure	1	100	3 - 99	2	50	8 - 98
Severe Acute Heart Disease	12	50	19 - 71	16	38	18 - 64
Severe Chronic Heart Disease	18	33	8 - 51	17	18	8 - 47
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	45	7	0 - 31	41	5	0 - 38
Gynecologic Disease	3	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	50	4	0 - 22	68	6	1 - 16
Musculoskeletal/Skin Conditions	9	11	0 -100	19	0	0 - 52
Neuropsychiatric/Sensory Disease	11	0	1 - 46	3	0	0 -100
Urologic Disease	11	0	0 - 50	12	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	49
Occupancy Rate (%):	35
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	9
Percent of Physicians Who Are Board Certified Specialists:	11
Interns and Residents:	0
Registered Nurses:	21
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

ST ANNS HOSP OF CHICAGO INC

4950 W THOMAS ST
CHICAGO , IL 60651

Medicare Hospital Provider Number: 140156

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	675	15	9 - 15	746	16	9 - 16
Cancer	18	28	21 - 62	22	50	23 - 64
Cerebrovascular Accidents	33	45	11 - 45	27	41	14 - 51
Gastrointestinal Catastrophes	9	22	10 - 65	9	56	9 - 69
Infectious Disease	11	45	10 - 65	10	20	14 - 65
Metabolic/Electrolyte Disorders	27	26	9 - 46	21	14	9 - 45
Pulmonary Disease	25	28	12 - 49	27	22	11 - 45
Renal Failure	6	33	8 - 79	3	100	8 - 84
Severe Acute Heart Disease	18	72	19 - 60	35	43	21 - 54
Severe Chronic Heart Disease	51	29	10 - 36	54	30	13 - 38
Severe Trauma	3	0	5 - 79	1	0	0 - 99
Gastrointestinal Disease	46	2	0 - 37	31	10	0 - 51
Gynecologic Disease	5	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	107	1	1 - 7	101	7	1 - 14
Musculoskeletal/Skin Conditions	54	6	0 - 23	61	8	0 - 48
Neuropsychiatric/Sensory Disease	22	5	0 - 87	37	0	0 - 32
Urologic Disease	17	0	0 - 80	16	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	239
Occupancy Rate (%):	(not available)
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

ST ANTHONY HOSPITAL

5666 EAST STATE STREET
ROCKFORD, IL 61108

Medicare Hospital Provider Number: 140233

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,204	11	9 - 13	2,025	12	10 - 14
Cancer	66	36	30 - 57	56	48	30 - 59
Cerebrovascular Accidents	90	27	16 - 36	80	25	16 - 36
Gastrointestinal Catastrophes	17	35	14 - 61	12	42	17 - 70
Infectious Disease	30	30	21 - 56	36	28	21 - 54
Metabolic/Electrolyte Disorders	16	19	6 - 50	18	28	6 - 51
Pulmonary Disease	90	24	15 - 36	86	21	17 - 37
Renal Failure	4	100	13 - 81	5	60	11 - 86
Severe Acute Heart Disease	86	37	26 - 49	100	44	29 - 51
Severe Chronic Heart Disease	132	22	14 - 30	98	22	16 - 34
Severe Trauma	7	29	10 - 72	12	58	12 - 66
Gastrointestinal Disease	144	3	1 - 9	117	3	1 - 10
Gynecologic Disease	16	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	401	7	2 - 8	370	5	2 - 7
Musculoskeletal/Skin Conditions	205	3	0 - 8	201	0	1 - 5
Neuropsychiatric/Sensory Disease	60	0	0 - 11	53	2	0 - 27
Urologic Disease	80	1	0 - 20	84	0	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	259
Occupancy Rate (%):	62
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	114
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	285
Licensed Practical Nurses:	55

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST ANTHONYS HOSPITAL

ST ANTHONYS WAY
ALTON, IL 62002

Medicare Hospital Provider Number: 140052

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,380	14	11 - 15	1,146	15	11 - 17
Cancer	43	47	25 - 56	30	43	23 - 60
Cerebrovascular Accidents	47	28	15 - 42	48	33	15 - 43
Gastrointestinal Catastrophes	9	22	14 - 69	10	40	14 - 71
Infectious Disease	35	34	21 - 55	20	40	21 - 64
Metabolic/Electrolyte Disorders	15	60	16 - 64	12	33	13 - 65
Pulmonary Disease	100	32	19 - 40	79	34	19 - 43
Renal Failure	1	0	1 - 97	10	50	18 - 82
Severe Acute Heart Disease	53	45	28 - 56	52	40	25 - 53
Severe Chronic Heart Disease	68	35	15 - 38	65	22	16 - 37
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	93	6	1 - 15	71	7	1 - 19
Gynecologic Disease	20	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	184	2	2 - 7	135	4	1 - 10
Musculoskeletal/Skin Conditions	114	1	1 - 7	104	2	0 - 11
Neuropsychiatric/Sensory Disease	119	1	1 - 8	59	3	0 - 24
Urologic Disease	54	0	0 - 27	52	0	1 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	206
Occupancy Rate (%):	62
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	88
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	82
Licensed Practical Nurses:	23

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

Medicare Provider Number: 14-0052

COMMENTS ON THE HCFA MORTALITY DATA

The data used by HCFA indicates that a total of 190 Medicare patients admitted to Saint Anthony's Hospital in 1987 died within thirty (30) days of admission. Of these, 134 died while still a patient of the Hospital, while 56 died after discharge. Our own records indicate that 2195 Medicare admissions occurred in 1986 while HCFA data indicate there were 1,380 Medicare admissions. This difference is due to HCFA counting only a patient's last hospital discharge in the total number.

Of the sixteen diagnostic categories listed, Saint Anthony's Hospital had 0 that fell outside the range of predicted, mortality rates. After correcting for errors in the data, Saint Anthony's Hospital still will not have any diagnostic categories whose actual mortality rate was outside the range of predicted mortality rates.

Although Saint Anthony's Hospital fell within the range of predicted mortality rates for both 1986 and 1987, we want to mention the major limitations the model has while pointing out unique services that Saint Anthony's offers.

1. Only the last admission of a Medicare beneficiary is used in HCFA's analysis. Previous admissions, regardless of the hospital, are excluded. Therefore, the number of deaths at Saint Anthony's Hospital were compared to a smaller number of admissions (37% smaller) than what actually occurred. This caused our actual mortality rates to be higher than they should be.

2. It should be emphasized that the HCFA data deal only with Medicare patients, who are naturally older than the general population. In fact, the average age of the patients used in the data was seventy-six years and the average age of those who died within 30 days of admission was seventy-eight years. Of the 190 patients who died within 30 days of admission, seventy-three patients or 38% died within three days of admission and 38 patients or 20% died within one day of the admission. The average age of the 73 patient group was 77.81 years old with 42.5% over the age of eighty-one years.

   Given the ages of these patients and their hospital survival times, this might indicate that the patients were terminally ill when they entered the hospital and thus would greatly increase the mortality rate. Saint Anthony's Hospital does, in fact, operate programs that attract the elderly or terminally ill i.e. hospice, home health, Extended Care Facility. Therefore, these figures do not

address Saint Anthony's overall "success" rate with a specific diagnosis.

3. Although 1987 data was used, deaths were identified through January 31, 1988. For example, two patients who died at Saint Anthony's Hospital in January, 1987 were counted both in our 1986 and 1987 mortality rates.

4. Patients who died after being transferred from other hospitals to Saint Anthony's Hospital were counted as deaths at Saint Anthony's Hospital regardless of the quality of treatment or length of stay at either hospital.

5. Hospitals who treat only a few patients in a diagnostic category could have their mortality rates misinterpreted. The smaller the number of cases, the more likely this will occur, (i.e. in seven of the sixteen diagnostic categories shown, Saint Anthony's Hospital had fifty or fewer cases).

6. The data does not distinguish the source of the patient's admission. Those patients admitted from nursing homes or through our Emergency Room are generally more high risk compared to other patients.

7. The release of the hospital characteristics data in tandem with the mortality data may lead the public to assume they are related to hospitals' clinical quality because they are paired with the mortality data.

As Doctor Roper, Administrator of the Health Care Financing Administration, stated in his letter to all hospital administrators dated September 15, 1988, "This information by itself is not a complete measure of the quality of care at an individual hospital... until we have developed additional statistical measures to deal with complex issues such as severity of illness, we cannot and do not recommend the use of the information by itself to make judgments about the quality of care in an individual hospital or to make comparisons among hospitals."

Until HCFA has developed additional statistical measures to deal with complex issues such as severity of illness, the data should not be used to judge the quality of care provided by different hospitals. Unfortunately, we are concerned the mass media might try to do this.

Saint Anthony's Hospital currently has its own quality indicators in place that measure the outcome of care. We feel our quality assurance plans provide a better measure of our hospital's performance.

ST ANTHONYS HOSPITAL

2875 WEST 19TH STREET
CHICAGO, IL 60623

Medicare Hospital Provider Number: 140095

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	623	17	11 - 17	701	15	11 - 17
Cancer	12	50	15 - 68	25	52	29 - 69
Cerebrovascular Accidents	26	38	9 - 47	40	17	14 - 40
Gastrointestinal Catastrophes	13	38	15 - 66	7	43	10 - 74
Infectious Disease	15	53	14 - 63	22	27	17 - 56
Metabolic/Electrolyte Disorders	30	13	10 - 42	32	28	9 - 45
Pulmonary Disease	67	39	18 - 43	41	37	14 - 45
Renal Failure	5	40	9 - 83	3	67	3 - 87
Severe Acute Heart Disease	16	63	18 - 63	32	59	25 - 59
Severe Chronic Heart Disease	41	17	10 - 35	39	33	12 - 42
Severe Trauma	1	0	0 - 98	2	0	3 - 88
Gastrointestinal Disease	44	0	1 - 13	46	2	0 - 31
Gynecologic Disease	5	20	0 -100	5	0	0 -100
Low-Risk Heart Disease	64	2	0 - 13	85	1	1 - 9
Musculoskeletal/Skin Conditions	46	2	0 - 40	68	0	0 - 10
Neuropsychiatric/Sensory Disease	12	0	0 -100	19	0	0 - 87
Urologic Disease	27	4	0 - 66	23	4	0 - 78

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	183
Occupancy Rate (%):	51
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	68
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	108
Licensed Practical Nurses:	29

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST ANTHONYS MEMORIAL HOSPITAL

503 N MAPLE STREET
EFFINGHAM, IL 62401

Medicare Hospital Provider Number: 140032

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,413	14	10 - 15	1,370	14	10 - 15
Cancer	37	59	25 - 58	33	52	22 - 58
Cerebrovascular Accidents	62	21	16 - 37	56	34	19 - 44
Gastrointestinal Catastrophes	7	57	7 - 72	14	43	12 - 63
Infectious Disease	18	22	20 - 61	17	41	22 - 68
Metabolic/Electrolyte Disorders	17	35	12 - 58	28	29	13 - 50
Pulmonary Disease	119	34	20 - 39	113	36	18 - 38
Renal Failure	4	50	10 - 88	8	13	19 - 80
Severe Acute Heart Disease	55	55	25 - 53	48	42	26 - 55
Severe Chronic Heart Disease	63	21	16 - 37	62	29	14 - 37
Severe Trauma	0	-	-	2	50	7 - 96
Gastrointestinal Disease	91	1	1 - 9	137	4	0 - 11
Gynecologic Disease	21	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	134	2	2 - 8	134	4	1 - 10
Musculoskeletal/Skin Conditions	162	1	1 - 6	140	1	1 - 7
Neuropsychiatric/Sensory Disease	37	3	0 - 44	50	0	0 - 12
Urologic Disease	105	1	0 - 9	93	3	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	146
Occupancy Rate (%):	56
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	39
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	0
Registered Nurses:	82
Licensed Practical Nurses:	51

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

St Anthony's Memorial Hospital

503 North Maple Street
Effingham, Illinois 62401
217-342-2121

Medicare Provider Number: 140032

COMMENTS ON 1987 HCFA MORTALITY DATA

A review of the HCFA data for St. Anthony's Memorial Hospital shows the overall mortality rate to remain constant at 14% for 1986 and 1987. Only 1,473 of the 2,289 Medicare discharges from our Hospital in 1987 were included in the HCFA study, since each patient was counted once regardless of the number of admissions they had. However, all Medicare deaths were included. Comparing the number of deaths to the total number of discharges results in a lower mortality rate of 9%.

Although the total mortality rate remained constant for both years, there were fluctuations in the 16 individual diagnostic categories. Some fluctuations were simply due to chance, with only two years of statistics and small numbers of patients in some groups. However, other variations were due to the differences in the services we offer and the patients we serve.

With the opening of our Cancer Center, we are able to provide total cancer care including surgery, chemotherapy, and radiation therapy, to more patients, eliminating their need to obtain care from larger distant hospitals. Cancer patients can now receive in- and out-patient care in close proximity to their home and family. This is a tremendous help to all patients, but especially beneficial to our terminal cancer patients.

Cardiology is also an increasing service in our Hospital. With staff Cardiologists providing consultative services, we not only provide care to local patients, but also to patients from many outlying areas. We are certified by the American Heart Association as a First Hour Heart Care provider and have an Intensive Care Unit that is equipped and staffed to care for critical and coronary patients.

Other special features of our Hospital are a Level II Trauma Designation by the Illinois Department of Public Health and an affiliation with our local Hospice, providing special rooms for patients and families to care for terminal patients in a more home-like atmosphere.

St. Anthony's Memorial Hospital is also very active in providing screening and educational programs for prevention, early detection and proper management of disease processes. We have provided mammography, colorectal and cholesterol screening programs. We have held Community Forums where the general public is invited to hear physicians speak on health topics such as Hypertension, Oncology, Arthritis, Cholesterol, Cataracts and Glaucoma and so on.

St. Anthony's Memorial Hospital, including its Board and Medical Staff, has a strong commitment to quality and has an effective Hospital-wide quality assurance program in place. One portion of this program is the mortality review, which includes screening of all deaths. Any areas with potential or perceived problems are reviewed in more depth through a physician peer review process, so steps can be taken to resolve problems if warranted and to continuously improve care. The HCFA mortality data is used in the quality assurance process to identify areas where special study may be of benefit. Our most recent review of HCFA mortality data was on patients who died after discharge but within 30 days of admission. We found that these patients were discharged to Nursing Homes or referred for Hospice or Home Care and were terminal or given a poor prognosis on discharge. Our review confirmed that these patients were not in need of further hospital inpatient services, but needed terminal or support care in another setting.

St. Anthony's Memorial Hospital appreciates consumers' and hospitals' need for comparative quality of care and mortality data. The American Hospital Association (AHA) and the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) are also investigating methods of evaluating hospital quality that rely on measures other than mortality rates. We look forward to working with HCFA, AHA and JCAHO on refining methodologies to evaluate and compare the quality of health care.

Gregory A. Voss
Executive Vice President

GAV:lm

ST BERNARD HOSPITAL

64TH & DAN RYAN EXPRESSWAY
CHICAGO, IL 60621

Medicare Hospital Provider Number: 140103

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	925	15	11 - 17	873	15	10 - 16
Cancer	23	52	29 - 70	27	33	23 - 59
Cerebrovascular Accidents	47	28	13 - 39	41	37	13 - 43
Gastrointestinal Catastrophes	7	29	13 - 75	3	67	4 - 86
Infectious Disease	10	40	12 - 68	9	22	16 - 71
Metabolic/Electrolyte Disorders	35	29	12 - 47	28	21	9 - 44
Pulmonary Disease	61	21	14 - 37	49	18	11 - 35
Renal Failure	7	29	9 - 77	10	60	11 - 75
Severe Acute Heart Disease	47	51	24 - 54	47	40	24 - 53
Severe Chronic Heart Disease	73	15	14 - 32	59	17	10 - 31
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	58	3	0 - 18	47	2	0 - 27
Gynecologic Disease	2	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	135	4	1 - 10	110	5	1 - 12
Musculoskeletal/Skin Conditions	62	3	0 - 19	87	3	0 - 31
Neuropsychiatric/Sensory Disease	10	10	0 -100	18	0	0 - 69
Urologic Disease	23	4	0 - 86	14	0	0 - 97

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	217
Occupancy Rate (%):	73
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	179
Licensed Practical Nurses:	22

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST CLEMENT HOSPITAL

325 SPRING STREET
RED BUD, IL 62278

Medicare Hospital Provider Number: 140061

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	638	11	10 - 16	693	12	9 - 15
Cancer	17	41	26 - 72	18	72	29 - 71
Cerebrovascular Accidents	19	47	13 - 56	18	33	15 - 57
Gastrointestinal Catastrophes	3	67	8 - 89	2	50	3 - 92
Infectious Disease	5	20	7 - 75	4	50	5 - 82
Metabolic/Electrolyte Disorders	15	13	9 - 51	11	27	12 - 65
Pulmonary Disease	64	17	20 - 41	56	25	16 - 41
Renal Failure	3	67	9 - 91	1	0	3 - 98
Severe Acute Heart Disease	10	50	17 - 73	14	43	18 - 67
Severe Chronic Heart Disease	32	28	9 - 41	29	14	14 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	81	5	1 - 14	96	4	1 - 12
Gynecologic Disease	7	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	88	2	1 - 10	120	3	2 - 10
Musculoskeletal/Skin Conditions	54	2	0 - 16	65	3	1 - 14
Neuropsychiatric/Sensory Disease	13	8	0 - 83	6	0	0 -100
Urologic Disease	38	0	1 - 15	39	8	0 - 38

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	105
Occupancy Rate (%):	35
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	13
Percent of Physicians Who Are Board Certified Specialists:	46
Interns and Residents:	0
Registered Nurses:	47
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST ELIZABETH HOSP OF CHICAGO INC

1431 N CLAREMONT AVE
CHICAGO, IL 60622

Medicare Hospital Provider Number: 140094

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	893	14	10 - 16	890	14	9 - 15
Cancer	17	47	17 - 63	20	45	19 - 62
Cerebrovascular Accidents	37	22	14 - 42	58	24	17 - 40
Gastrointestinal Catastrophes	10	20	12 - 63	8	38	12 - 73
Infectious Disease	14	36	14 - 63	13	31	16 - 66
Metabolic/Electrolyte Disorders	28	21	15 - 50	20	25	7 - 49
Pulmonary Disease	29	31	12 - 47	33	18	13 - 42
Renal Failure	6	17	1 - 78	3	0	5 - 82
Severe Acute Heart Disease	36	64	23 - 55	31	55	27 - 61
Severe Chronic Heart Disease	68	26	13 - 35	45	22	10 - 36
Severe Trauma	4	25	2 - 81	3	33	0 - 91
Gastrointestinal Disease	84	4	1 - 12	65	3	0 - 16
Gynecologic Disease	6	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	96	4	1 - 12	106	3	1 - 10
Musculoskeletal/Skin Conditions	61	7	0 - 24	91	2	1 - 10
Neuropsychiatric/Sensory Disease	17	6	0 - 92	21	10	0 - 98
Urologic Disease	60	3	0 - 25	38	8	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	315
Occupancy Rate (%):	52
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	178
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST ELIZABETH HOSPITAL

211 SOUTH 3RD STREET
BELLEVILLE, IL 62222

Medicare Hospital Provider Number: 140187

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,723	12	11 - 15	3,530	13	11 - 15
Cancer	148	42	32 - 53	164	46	32 - 52
Cerebrovascular Accidents	142	32	20 - 37	145	24	20 - 36
Gastrointestinal Catastrophes	25	28	19 - 58	29	62	19 - 57
Infectious Disease	86	34	25 - 50	88	44	26 - 52
Metabolic/Electrolyte Disorders	51	22	14 - 43	27	15	12 - 45
Pulmonary Disease	242	25	18 - 33	213	30	17 - 33
Renal Failure	11	27	17 - 76	14	79	23 - 79
Severe Acute Heart Disease	105	41	30 - 51	84	39	28 - 50
Severe Chronic Heart Disease	195	24	16 - 30	200	19	16 - 29
Severe Trauma	11	45	9 - 66	7	14	6 - 66
Gastrointestinal Disease	254	3	2 - 7	236	4	2 - 8
Gynecologic Disease	34	0	0 - 90	37	0	0 -100
Low-Risk Heart Disease	406	2	2 - 5	331	2	2 - 6
Musculoskeletal/Skin Conditions	345	3	1 - 6	316	2	1 - 6
Neuropsychiatric/Sensory Disease	245	1	1 - 6	259	1	1 - 5
Urologic Disease	155	2	1 - 8	133	2	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	443
Occupancy Rate (%):	72
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	176
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	5
Registered Nurses:	273
Licensed Practical Nurses:	21

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST ELIZABETH MEDICAL CENTER

2100 MADISON AVENUE
GRANITE CITY, IL 62040

Medicare Hospital Provider Number: 140125

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,548	13	9 - 14	1,675	12	9 - 14
Cancer	37	43	26 - 59	53	49	26 - 55
Cerebrovascular Accidents	64	31	16 - 40	63	35	17 - 41
Gastrointestinal Catastrophes	9	33	13 - 71	14	21	15 - 61
Infectious Disease	33	30	17 - 52	34	44	22 - 58
Metabolic/Electrolyte Disorders	20	35	17 - 60	28	18	13 - 46
Pulmonary Disease	74	35	14 - 38	90	29	16 - 38
Renal Failure	3	67	6 - 89	0	-	-
Severe Acute Heart Disease	55	45	23 - 51	59	51	24 - 51
Severe Chronic Heart Disease	105	22	15 - 32	86	30	16 - 36
Severe Trauma	2	50	2 - 92	3	0	2 - 81
Gastrointestinal Disease	100	0	1 - 6	115	3	1 - 10
Gynecologic Disease	15	0	0 - 72	9	0	0 -100
Low-Risk Heart Disease	230	3	2 - 7	261	3	1 - 7
Musculoskeletal/Skin Conditions	131	2	1 - 9	156	1	1 - 6
Neuropsychiatric/Sensory Disease	74	1	0 - 13	67	1	0 - 15
Urologic Disease	49	4	0 - 43	55	4	0 - 30

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	329
Occupancy Rate (%):	59
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	103
Percent of Physicians Who Are Board Certified Specialists:	55
Interns and Residents:	0
Registered Nurses:	263
Licensed Practical Nurses:	45

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SAINT ELIZABETH MEDICAL CENTER

2100 Madison Ave.
Granite City, Ill. 62040

(618)798-3000

October 19, 1988

Department of Health and Human Services
Health Care Financing Administration
6325 Security Boulevard
Baltimore, Maryland 21207

Gentlemen:

We have reviewed the mortality rate information planned for publication in December. Our statistical data show us to be within the normal range for all categories. However, we have elected to comment because we believe this information is a poor indicator for judging quality of care. Additionally, we are in agreement with the Illinois Hospital Association in that HCFA has made fundamental methodological errors in the model used for their data release.

1. The use of a thirty day post hospitalization mortality rate causes inaccurate and inflated percentages by attributing deaths to the hospital that are unrelated to the conditions for which the patients were admitted and treated.

2. Since patients are grouped by principal diagnosis, which is the diagnosis that caused admission and not necessarily death, the mortality statistics by category are misleading. For example, a patient admitted to the hospital for pneumonia but actually dies from cancer is counted as a pneumonia death, similarly, a patient admitted to the hospital for pneumonia who dies in an auto accident within thirty days of discharge is also counted as a pneumonia death.

3. The data do not show the patient admission sources. Those admitted through the emergency department are generally high-risk candidates compared to other patients. Additionally, patients admitted from nursing homes tend to be more critically ill than those admitted from their own homes.

4. The data may also be misleading if there are only a small number of cases in a particular group. The smaller the number, the more likely the number is subject to misinterpretation. Moreover, while the published information applies only to Medicare patients, the public may think the data apply to all patients.

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Area Wide Trauma Center



5. Taken alone, the data do not allow for interpretation concerning why patients died or whether deaths could have been avoided. Only examination of the medical records could identify particular circumstances.

6. Since the statistics include only Medicare patients, who are naturally older than the general population, a hospital's "success" rate overall and with specific diagnoses can be grossly misinterpreted by the public.

7. The usefulness of the mortality rates in general is questioned since there tends to be a great variance in a hospital's Medicare mortality rate versus the non-Medicare rate versus the overall rate.

Certainly before disseminating this report, the data should be collected for a number of years. Only if the observations remain somewhat constant for each hospital from year to year can it be considered reliable even though questions of validity would still remain.

Sincerely,

Paul E. Raczkiewicz, Executive Vice President
St. Elizabeth Medical Center
Granite City, Illinois

ST FRANCIS HOSPITAL

355 RIDGE AVE
EVANSTON , IL 60202

Medicare Hospital Provider Number: 140080

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,701	12	11 - 15	3,526	13	12 - 16
Cancer	94	37	29 - 52	107	39	32 - 55
Cerebrovascular Accidents	96	27	18 - 37	112	23	20 - 38
Gastrointestinal Catastrophes	31	52	22 - 60	34	35	22 - 58
Infectious Disease	63	44	31 - 60	94	49	27 - 53
Metabolic/Electrolyte Disorders	58	26	15 - 44	58	26	14 - 42
Pulmonary Disease	252	29	24 - 39	220	31	22 - 39
Renal Failure	16	38	15 - 71	9	33	13 - 78
Severe Acute Heart Disease	171	36	32 - 49	164	41	32 - 50
Severe Chronic Heart Disease	184	18	17 - 31	167	26	19 - 34
Severe Trauma	6	17	5 - 70	6	33	2 - 76
Gastrointestinal Disease	162	2	1 - 7	169	2	2 - 8
Gynecologic Disease	19	5	0 -100	20	0	0 - 99
Low-Risk Heart Disease	946	4	2 - 6	821	4	2 - 6
Musculoskeletal/Skin Conditions	261	3	1 - 7	247	2	1 - 6
Neuropsychiatric/Sensory Disease	85	1	1 - 9	96	1	0 - 10
Urologic Disease	104	3	0 - 15	110	5	1 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	412
Occupancy Rate (%):	69
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	307
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

ST FRANCIS HOSPITAL

12935 SOUTH GREGORY
BLUE ISLAND , IL 60406

Medicare Hospital Provider Number: 140118

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,124	14	10 - 14	3,149	12	10 - 14
Cancer	102	51	32 - 55	106	42	31 - 55
Cerebrovascular Accidents	139	25	20 - 37	143	27	20 - 36
Gastrointestinal Catastrophes	21	33	13 - 55	23	30	15 - 55
Infectious Disease	64	42	21 - 50	59	36	25 - 54
Metabolic/Electrolyte Disorders	39	44	14 - 49	60	33	16 - 46
Pulmonary Disease	128	26	17 - 35	102	32	16 - 38
Renal Failure	10	70	20 - 81	18	44	15 - 72
Severe Acute Heart Disease	113	28	27 - 46	110	29	29 - 49
Severe Chronic Heart Disease	189	25	16 - 30	229	27	17 - 30
Severe Trauma	6	17	5 - 69	10	10	8 - 57
Gastrointestinal Disease	236	5	1 - 8	228	1	2 - 6
Gynecologic Disease	24	0	0 -100	21	0	0 -100
Low-Risk Heart Disease	518	5	2 - 6	520	6	2 - 6
Musculoskeletal/Skin Conditions	213	5	0 - 10	241	2	1 - 6
Neuropsychiatric/Sensory Disease	86	3	1 - 13	85	2	0 - 16
Urologic Disease	114	2	0 - 19	101	3	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	388
Occupancy Rate (%):	69
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	135
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	0
Registered Nurses:	295
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST. FRANCIS HOSPITAL
& HEALTH CENTER

12935 South Gregory Street
Blue Island, Illinois 60406

312·597·2000

October 17, 1988

Mrs. Sandra Kappert
Health Standards & Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Medicare Provider #14-0118

Dear Mrs. Kappert:

The HCFA hospital characteristics data indicates that 5,126 Medicare patients were admitted to St. Francis Hospital & Health Center, and 561 died within 30 days of admission. Of these deaths, 497 died while still a patient of the hospital, while 64 died after discharge.

In verifying this data, our records indicate that 5,761 Medicare admissions occurred in 1987. Presumably, the discrepancy reflects multiple admission of individual beneficiaries to the hospital or different hospitals.

Our records also indicate that of the 388 Medicare patients that died at the time of discharge, the remaining 5,373 admissions were still alive at the time of discharge. It is impossible to determine the percentage of Medicare patients who died 30 days after discharge, as information concerning death after discharge is not included in the patient's medical record. In conclusion, it is impossible to effectively determine the accuracy of the patient data reported.

In addition, St. Francis Hospital & Health Center is dedicated to providing high quality care and this commitment has been operationalized by the establishment of a comprehensive, ongoing Quality Assurance Program.

Sincerely,

St. Francis Hospital & Health Center

Glenn Gutzeit, M.D.
Chairman, Medical Staff Review Committee

GG/djs

cc: Bryant Hanson
Cyndee Hartz
Sue Burgin

ST FRANCIS HOSPITAL

1215 EAST UNION AVENUE
LITCHFIELD, IL 62056

Medicare Hospital Provider Number: 140199

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	976	13	11 - 16	965	13	11 - 17
Cancer	17	53	23 - 69	36	64	32 - 66
Cerebrovascular Accidents	33	30	17 - 49	35	37	18 - 50
Gastrointestinal Catastrophes	8	38	15 - 76	6	33	11 - 78
Infectious Disease	13	8	17 - 55	12	33	14 - 66
Metabolic/Electrolyte Disorders	12	33	5 - 60	14	14	5 - 50
Pulmonary Disease	57	33	19 - 45	51	25	16 - 42
Renal Failure	4	75	10 - 86	4	75	12 - 89
Severe Acute Heart Disease	44	52	31 - 61	51	37	31 - 58
Severe Chronic Heart Disease	72	10	15 - 31	58	16	16 - 36
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	87	2	2 - 11	98	3	2 - 11
Gynecologic Disease	13	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	107	6	2 - 12	92	1	2 - 9
Musculoskeletal/Skin Conditions	86	0	1 - 7	100	7	1 - 16
Neuropsychiatric/Sensory Disease	37	0	1 - 16	43	2	0 - 33
Urologic Disease	36	6	0 - 58	37	0	0 - 33

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	138
Occupancy Rate (%):	39
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	18
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	52
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST FRANCIS MEDICAL CENTER

530 N E GLEN OAK
PEORIA, IL 61637

Medicare Hospital Provider Number: 140067

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,938	10	10 - 14	3,985	10	10 - 14
Cancer	126	36	31 - 53	168	41	34 - 54
Cerebrovascular Accidents	164	26	19 - 35	160	24	20 - 36
Gastrointestinal Catastrophes	60	18	27 - 54	36	25	21 - 54
Infectious Disease	36	44	23 - 57	28	25	23 - 58
Metabolic/Electrolyte Disorders	44	18	12 - 41	43	7	8 - 33
Pulmonary Disease	161	27	19 - 36	139	23	17 - 35
Renal Failure	68	16	14 - 58	60	18	11 - 57
Severe Acute Heart Disease	137	34	29 - 47	154	46	30 - 48
Severe Chronic Heart Disease	165	28	16 - 31	125	24	15 - 32
Severe Trauma	26	27	10 - 49	14	43	7 - 60
Gastrointestinal Disease	262	4	2 - 8	263	3	2 - 7
Gynecologic Disease	22	0	0 - 38	29	0	0 -100
Low-Risk Heart Disease	518	3	2 - 6	492	4	2 - 6
Musculoskeletal/Skin Conditions	466	2	1 - 5	464	2	1 - 5
Neuropsychiatric/Sensory Disease	198	2	1 - 7	236	1	1 - 6
Urologic Disease	146	1	0 - 7	193	1	1 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	749
Occupancy Rate (%):	62
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	224
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	86
Registered Nurses:	891
Licensed Practical Nurses:	104

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

ST FRANCIS XAVIER CABRINI HOSPITAL

811 S LYTLE ST
CHICAGO, IL 60607

Medicare Hospital Provider Number: 140212

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	846	13	9 - 15	804	11	9 - 15
Cancer	16	44	22 - 69	15	47	19 - 67
Cerebrovascular Accidents	22	23	10 - 47	25	16	12 - 43
Gastrointestinal Catastrophes	7	43	8 - 73	7	14	11 - 69
Infectious Disease	14	57	23 - 73	8	63	16 - 77
Metabolic/Electrolyte Disorders	35	20	14 - 46	27	22	11 - 47
Pulmonary Disease	48	27	13 - 40	39	18	11 - 38
Renal Failure	5	60	17 - 91	9	33	10 - 75
Severe Acute Heart Disease	15	40	15 - 62	14	36	17 - 65
Severe Chronic Heart Disease	55	18	13 - 35	67	28	16 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	60	3	0 - 19	52	2	1 - 16
Gynecologic Disease	5	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	139	1	1 - 6	141	3	1 - 8
Musculoskeletal/Skin Conditions	55	4	0 - 20	80	4	1 - 14
Neuropsychiatric/Sensory Disease	16	0	0 - 94	28	4	0 - 61
Urologic Disease	34	6	0 - 42	23	4	1 - 34

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	210
Occupancy Rate (%):	66
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST JAMES HOSPITAL

1423 CHICAGO ROAD
CHICAGO HEIGHTS, IL 60411

Medicare Hospital Provider Number: 140079

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,252	15	11 - 16	2,325	15	11 - 16
Cancer	80	49	27 - 53	94	43	28 - 53
Cerebrovascular Accidents	92	25	19 - 38	92	30	19 - 40
Gastrointestinal Catastrophes	20	45	18 - 62	17	41	17 - 64
Infectious Disease	47	45	25 - 56	41	41	22 - 55
Metabolic/Electrolyte Disorders	36	31	12 - 47	46	33	14 - 46
Pulmonary Disease	137	41	20 - 39	145	32	21 - 39
Renal Failure	10	40	10 - 73	10	50	13 - 78
Severe Acute Heart Disease	83	51	27 - 50	88	51	32 - 54
Severe Chronic Heart Disease	156	24	16 - 31	116	28	16 - 34
Severe Trauma	2	0	2 - 89	6	0	9 - 62
Gastrointestinal Disease	164	2	1 - 8	185	6	2 - 10
Gynecologic Disease	27	4	0 -100	19	0	0 -100
Low-Risk Heart Disease	376	3	2 - 6	339	3	2 - 6
Musculoskeletal/Skin Conditions	194	2	1 - 7	211	2	1 - 7
Neuropsychiatric/Sensory Disease	43	7	0 - 77	60	8	0 - 32
Urologic Disease	83	2	0 - 16	102	2	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	334
Occupancy Rate (%):	59
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	230
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

ST JAMES HOSPITAL

610 E WATER ST
PONTIAC, IL 61764

Medicare Hospital Provider Number: 140161

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	734	10	9 - 14	744	12	9 - 15
Cancer	13	62	24 - 74	20	35	24 - 66
Cerebrovascular Accidents	26	27	14 - 48	26	23	16 - 49
Gastrointestinal Catastrophes	3	33	5 - 86	4	50	8 - 84
Infectious Disease	8	25	13 - 70	6	50	9 - 77
Metabolic/Electrolyte Disorders	34	24	11 - 44	15	33	12 - 60
Pulmonary Disease	25	32	16 - 53	43	33	16 - 46
Renal Failure	2	0	5 - 90	3	33	5 - 88
Severe Acute Heart Disease	15	67	24 - 70	22	64	20 - 59
Severe Chronic Heart Disease	40	15	13 - 37	34	26	11 - 41
Severe Trauma	2	0	1 - 90	0	-	-
Gastrointestinal Disease	64	2	1 - 12	83	2	1 - 11
Gynecologic Disease	3	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	113	1	1 - 7	105	2	1 - 9
Musculoskeletal/Skin Conditions	77	4	1 - 14	91	2	0 - 12
Neuropsychiatric/Sensory Disease	17	0	0 - 75	13	0	0 - 52
Urologic Disease	28	0	0 - 82	27	7	0 - 44

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	93
Occupancy Rate (%):	57
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	24
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	0
Registered Nurses:	61
Licensed Practical Nurses:	21

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST JOHNS HOSPITAL

800 E CARPENTER ST
SPRINGFIELD, IL 62702

Medicare Hospital Provider Number: 140053

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	5,962	10	9 - 13	5,897	10	9 - 13
Cancer	201	45	33 - 53	233	42	33 - 52
Cerebrovascular Accidents	157	20	19 - 34	146	25	21 - 37
Gastrointestinal Catastrophes	45	24	21 - 51	34	44	23 - 60
Infectious Disease	40	35	25 - 57	17	35	20 - 65
Metabolic/Electrolyte Disorders	100	30	19 - 44	71	44	21 - 49
Pulmonary Disease	170	18	18 - 34	192	26	20 - 36
Renal Failure	9	44	13 - 78	13	46	19 - 79
Severe Acute Heart Disease	169	40	29 - 46	166	37	30 - 47
Severe Chronic Heart Disease	286	27	18 - 30	269	22	19 - 31
Severe Trauma	12	8	15 - 57	7	29	6 - 71
Gastrointestinal Disease	336	3	2 - 7	383	3	2 - 6
Gynecologic Disease	48	0	0 - 89	48	2	0 - 60
Low-Risk Heart Disease	1,257	4	3 - 6	1,128	5	3 - 6
Musculoskeletal/Skin Conditions	571	2	1 - 5	649	3	1 - 5
Neuropsychiatric/Sensory Disease	205	2	1 - 7	341	2	2 - 6
Urologic Disease	237	2	1 - 7	248	3	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	747
Occupancy Rate (%):	81
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	377
Percent of Physicians Who Are Board Certified Specialists:	84
Interns and Residents:	71
Registered Nurses:	578
Licensed Practical Nurses:	217

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

ST JOSEPH HOSP

77 N AIRLITE ST
ELGIN, IL 60120

Medicare Hospital Provider Number: 140217

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,420	16	10 - 15	1,416	16	10 - 15
Cancer	59	41	27 - 55	54	50	29 - 58
Cerebrovascular Accidents	51	25	15 - 40	42	38	13 - 44
Gastrointestinal Catastrophes	5	40	10 - 81	9	33	10 - 68
Infectious Disease	24	58	20 - 60	16	38	16 - 63
Metabolic/Electrolyte Disorders	44	39	16 - 49	30	30	12 - 49
Pulmonary Disease	79	24	16 - 38	78	50	19 - 43
Renal Failure	11	64	16 - 77	7	86	14 - 78
Severe Acute Heart Disease	39	54	28 - 59	39	38	26 - 57
Severe Chronic Heart Disease	64	27	15 - 37	76	29	14 - 36
Severe Trauma	2	50	1 - 94	3	33	6 - 87
Gastrointestinal Disease	136	4	1 - 11	117	6	1 - 13
Gynecologic Disease	10	10	0 -100	13	8	0 -100
Low-Risk Heart Disease	158	1	1 - 5	164	5	1 - 10
Musculoskeletal/Skin Conditions	146	7	1 - 12	151	3	0 - 10
Neuropsychiatric/Sensory Disease	45	7	0 - 39	42	2	0 - 29
Urologic Disease	45	2	0 - 45	45	0	1 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	280
Occupancy Rate (%):	55
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	193
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	0
Registered Nurses:	153
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Saint Joseph Hospital

77 North Airlite Street
Elgin, IL 60123-4912
Telephone 312 695-3200

A Division of the
Franciscan Sisters
Health Care Corporation

14-0217

COMMENTS ON THE HCFA MORTALITY DATA - (1987)

Saint Joseph Hospital, Elgin

Data Verification

The data released by HCFA this year indicates that a total of 1420 Medicare patients were included in the study. Of this total, 221 patients who were admitted to Saint Joseph Hospital died within 30 days of admission. Of these, 181 died while still inpatients of the hospital, while 30 died after discharge. Our own records indicate that approximately 2110 Medicare admissions occurred in 1987. Presumably, the discrepancy reflects multiple admissions of individual patients to the hospital. In addition, one death attributed to the hospital within 30 days of admission specified a date of discharge after the date of death.

Interpretive Remarks

A review of the HCFA data indicates that Saint Joseph Hospital falls within the predicted range of mortality for all individual diagnostic categories. It is only in the overall category that the hospital deviates from the 10-15% range of predicted mortality by 1%.

An in-depth study was conducted for the two categories which were nearest the upper limits of the predicted ranges of mortality. The two categories reviewed by the hospital were Infectious Disease and Severe Acute Heart Disease. Both categories, although within the predicted range of mortality, were within two-three percentage points of the allowable range. This review indicated nearly all cases had secondary diagnoses which added a severity factor which was not factored into the HCFA model for predicting mortality rates.

Saint Joseph Hospital has a quality assurance program in which all death records are reviewed by a Care Evaluation Committee. The mortality review begins with an assessment of whether death was an unexpected outcome of treatment and continues with the assessment of whether changes in treatment might have led to a different outcome. Each care evaluation committee answered these questions through individual case review. In the Infectious Disease and Severe Acute Heart Disease categories, the Committees found the care rendered to be appropriate.

Although we believe the HCFA mortality data does not make any meaningful statement concerning the quality of care rendered at this hospital, we do hold that the data can be a useful tool. The

mortality data will be analyzed to determine whether patients shared some clinical characteristics related to diagnoses or similar treatment.

The hospital will involve members of the medical staff to generate a framework for analysis and interpretation of this data so that it can be used as a tool for quality improvement.

ST JOSEPH HOSP MEDICAL CENTER

2200 E WASHINGTON
BLOOMINGTON, IL 61701

Medicare Hospital Provider Number: 140162

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	929	10	10 - 15	852	14	10 - 16
Cancer	44	32	25 - 55	41	34	29 - 61
Cerebrovascular Accidents	43	30	14 - 42	46	26	16 - 42
Gastrointestinal Catastrophes	8	50	7 - 70	3	33	7 - 88
Infectious Disease	9	22	9 - 64	8	75	22 - 80
Metabolic/Electrolyte Disorders	11	18	4 - 57	5	20	6 - 74
Pulmonary Disease	49	14	13 - 36	33	33	14 - 47
Renal Failure	7	57	15 - 84	5	40	9 - 84
Severe Acute Heart Disease	22	27	21 - 58	33	55	26 - 60
Severe Chronic Heart Disease	67	21	14 - 35	47	32	13 - 40
Severe Trauma	3	0	4 - 79	4	25	6 - 81
Gastrointestinal Disease	71	0	1 - 8	72	0	1 - 8
Gynecologic Disease	6	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	113	0	2 - 6	95	3	1 - 12
Musculoskeletal/Skin Conditions	114	4	0 - 13	111	2	0 - 9
Neuropsychiatric/Sensory Disease	18	11	0 - 96	27	4	0 - 45
Urologic Disease	20	0	0 - 92	24	4	0 - 95

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	148
Occupancy Rate (%):	49
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	171
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	118
Licensed Practical Nurses:	27

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST JOSEPH MEMORIAL HOSPITAL

800 N 2ND ST
MURPHYSBORO, IL 62966

Medicare Hospital Provider Number: 140140

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	648	10	9 - 15	632	13	10 - 16
Cancer	15	40	22 - 69	16	69	28 - 73
Cerebrovascular Accidents	15	27	12 - 56	22	36	14 - 54
Gastrointestinal Catastrophes	6	50	9 - 77	1	0	0 -100
Infectious Disease	12	25	18 - 67	10	80	18 - 69
Metabolic/Electrolyte Disorders	12	17	7 - 55	7	14	6 - 65
Pulmonary Disease	40	15	16 - 41	47	21	12 - 38
Renal Failure	2	50	5 - 94	2	50	5 - 94
Severe Acute Heart Disease	18	44	21 - 65	26	27	19 - 54
Severe Chronic Heart Disease	45	22	14 - 40	39	21	12 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	91	0	2 - 7	81	2	1 - 11
Gynecologic Disease	8	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	101	2	1 - 9	83	4	1 - 12
Musculoskeletal/Skin Conditions	26	0	0 - 32	32	3	1 - 25
Neuropsychiatric/Sensory Disease	13	0	0 -100	8	0	0 -100
Urologic Disease	22	0	0 - 52	29	0	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	62
Occupancy Rate (%):	63
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	21
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	44
Licensed Practical Nurses:	16

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST JOSEPHS HOSP

2900 NORTH LAKE SHORE DRIVE
CHICAGO, IL 60657

Medicare Hospital Provider Number: 140224

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,352	12	12 - 16	2,327	11	12 - 16
Cancer	94	36	30 - 54	98	51	31 - 55
Cerebrovascular Accidents	75	17	20 - 39	83	18	20 - 39
Gastrointestinal Catastrophes	31	19	24 - 57	26	50	22 - 62
Infectious Disease	43	40	23 - 55	46	48	25 - 57
Metabolic/Electrolyte Disorders	38	21	14 - 45	48	15	10 - 37
Pulmonary Disease	154	32	21 - 39	115	27	19 - 39
Renal Failure	13	8	13 - 64	14	21	12 - 68
Severe Acute Heart Disease	96	45	31 - 53	109	27	33 - 52
Severe Chronic Heart Disease	120	18	17 - 32	128	14	17 - 32
Severe Trauma	6	0	10 - 62	2	0	1 - 89
Gastrointestinal Disease	155	3	2 - 8	167	2	2 - 8
Gynecologic Disease	19	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	336	3	2 - 6	311	5	2 - 7
Musculoskeletal/Skin Conditions	225	1	1 - 5	249	0	2 - 5
Neuropsychiatric/Sensory Disease	112	1	0 - 8	102	2	0 - 10
Urologic Disease	62	0	0 - 10	77	0	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	503
Occupancy Rate (%):	61
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	369
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	55
Registered Nurses:	325
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

ST JOSEPHS HOSPITAL

915 E 5TH ST
ALTON, IL 62002

Medicare Hospital Provider Number: 140023

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	447	14	9 - 17	612	13	9 - 15
Cancer	12	50	18 - 70	16	50	22 - 69
Cerebrovascular Accidents	16	38	8 - 55	16	38	10 - 56
Gastrointestinal Catastrophes	4	50	7 - 83	4	50	4 - 82
Infectious Disease	5	40	8 - 79	7	14	10 - 67
Metabolic/Electrolyte Disorders	9	22	6 - 63	12	25	7 - 58
Pulmonary Disease	24	13	9 - 39	34	26	13 - 45
Renal Failure	3	0	7 - 82	2	100	9 - 94
Severe Acute Heart Disease	22	41	20 - 60	28	54	25 - 62
Severe Chronic Heart Disease	24	25	8 - 44	29	14	12 - 39
Severe Trauma	1	100	2 - 97	2	50	3 - 92
Gastrointestinal Disease	29	3	0 - 49	36	3	0 - 35
Gynecologic Disease	5	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	44	0	1 - 12	65	2	1 - 11
Musculoskeletal/Skin Conditions	41	2	0 - 30	68	4	0 - 31
Neuropsychiatric/Sensory Disease	10	0	0 -100	24	0	0 - 74
Urologic Disease	8	0	0 -100	28	0	0 - 35

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	165
Occupancy Rate (%):	41
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	104
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	101
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST JOSEPHS HOSPITAL

1005 JULIEN ST
BELVIDERE, IL 61008

Medicare Hospital Provider Number: 140128

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	456	13	9 - 16	443	13	9 - 16
Cancer	5	40	13 - 84	9	33	15 - 72
Cerebrovascular Accidents	15	53	10 - 58	12	42	10 - 62
Gastrointestinal Catastrophes	2	0	7 - 91	2	0	5 - 89
Infectious Disease	10	40	14 - 71	5	40	11 - 82
Metabolic/Electrolyte Disorders	8	63	15 - 75	10	40	8 - 65
Pulmonary Disease	40	13	16 - 40	30	20	10 - 41
Renal Failure	1	0	0 - 98	1	0	2 - 97
Severe Acute Heart Disease	12	58	17 - 68	13	46	18 - 68
Severe Chronic Heart Disease	34	26	10 - 41	38	26	14 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	39	3	0 - 28	43	7	1 - 25
Gynecologic Disease	11	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	48	4	0 - 22	55	7	0 - 25
Musculoskeletal/Skin Conditions	31	0	0 - 21	41	2	0 - 26
Neuropsychiatric/Sensory Disease	6	0	0 -100	9	0	0 - 99
Urologic Disease	39	0	0 - 37	27	0	1 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	60
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

ST JOSEPHS HOSPITAL

JAMESTOWN ROAD
BREESE, IL 62230

Medicare Hospital Provider Number: 140145

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	713	10	10 - 16	627	9	11 - 17
Cancer	7	43	21 - 84	17	29	27 - 71
Cerebrovascular Accidents	21	24	15 - 52	20	15	15 - 49
Gastrointestinal Catastrophes	15	13	15 - 55	3	0	11 - 84
Infectious Disease	9	44	15 - 73	1	0	2 - 97
Metabolic/Electrolyte Disorders	11	9	8 - 52	14	14	6 - 50
Pulmonary Disease	49	20	18 - 43	49	22	14 - 40
Renal Failure	4	50	8 - 86	1	0	3 - 99
Severe Acute Heart Disease	33	9	31 - 54	35	29	31 - 61
Severe Chronic Heart Disease	31	29	12 - 45	28	25	13 - 46
Severe Trauma	0	-	-	1	0	0 - 98
Gastrointestinal Disease	97	5	1 - 13	72	1	1 - 11
Gynecologic Disease	10	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	73	4	1 - 15	67	3	1 - 14
Musculoskeletal/Skin Conditions	76	3	2 - 12	58	0	1 - 9
Neuropsychiatric/Sensory Disease	14	0	0 - 85	9	0	0 - 92
Urologic Disease	31	6	0 - 57	22	0	1 - 24

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	93
Occupancy Rate (%):	53
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	19
Percent of Physicians Who Are Board Certified Specialists:	53
Interns and Residents:	0
Registered Nurses:	48
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST JOSEPHS HOSPITAL

1515 MAIN STREET
HIGHLAND, IL 62249

Medicare Hospital Provider Number: 140168

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	544	11	10 - 16	578	13	9 - 16
Cancer	12	33	19 - 70	13	85	21 - 64
Cerebrovascular Accidents	23	26	13 - 49	15	27	11 - 56
Gastrointestinal Catastrophes	3	67	5 - 86	3	33	1 - 87
Infectious Disease	8	13	18 - 70	8	38	10 - 71
Metabolic/Electrolyte Disorders	6	17	5 - 69	6	17	5 - 69
Pulmonary Disease	55	36	18 - 45	50	24	19 - 45
Renal Failure	5	60	15 - 89	1	100	0 -100
Severe Acute Heart Disease	9	44	19 - 77	16	63	24 - 69
Severe Chronic Heart Disease	28	7	16 - 39	26	12	10 - 38
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	70	6	1 - 17	71	7	1 - 18
Gynecologic Disease	3	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	68	3	1 - 13	78	3	1 - 11
Musculoskeletal/Skin Conditions	51	4	0 - 25	60	0	0 - 11
Neuropsychiatric/Sensory Disease	7	0	0 -100	23	4	0 - 80
Urologic Disease	12	0	0 - 97	13	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	106
Occupancy Rate (%):	38
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	14
Percent of Physicians Who Are Board Certified Specialists:	57
Interns and Residents:	0
Registered Nurses:	32
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

ST JOSEPHS MEDICAL CENTER

333 N MADISON
JOLIET, IL 60435

Medicare Hospital Provider Number: 140007

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,402	13	10 - 14	3,401	12	10 - 14
Cancer	135	47	31 - 52	143	41	30 - 51
Cerebrovascular Accidents	153	25	19 - 35	143	24	18 - 34
Gastrointestinal Catastrophes	27	33	17 - 56	26	46	19 - 60
Infectious Disease	36	47	22 - 57	36	36	23 - 57
Metabolic/Electrolyte Disorders	83	16	11 - 35	102	20	12 - 35
Pulmonary Disease	170	29	19 - 36	181	25	17 - 34
Renal Failure	11	18	19 - 76	10	40	9 - 73
Severe Acute Heart Disease	95	53	28 - 50	106	43	30 - 51
Severe Chronic Heart Disease	206	27	17 - 31	213	26	17 - 31
Severe Trauma	9	0	8 - 50	4	50	2 - 83
Gastrointestinal Disease	287	4	1 - 7	275	4	1 - 7
Gynecologic Disease	37	3	0 -100	18	0	0 - 86
Low-Risk Heart Disease	388	3	2 - 6	383	4	2 - 6
Musculoskeletal/Skin Conditions	333	4	1 - 6	344	5	1 - 7
Neuropsychiatric/Sensory Disease	132	2	0 - 9	122	2	1 - 8
Urologic Disease	151	1	1 - 6	118	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	538
Occupancy Rate (%):	66
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	239
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	337
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

SAINT JOSEPH MEDICAL CENTER

333 North Madison Street
Joliet, Illinois 60435
(815) 725-7133

October 4, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

This letter responds to Dr. William Roper's letter of September 15, 1988 which included mortality information about Medicare patients discharged from our hospital in 1987.

We are pleased that our efforts are effective in that we fell well within your predicted mortality ranges in the sixteen catagories.

We note we fell slightly over your predicted range in the area of severe acute heart disease. Our position with regard to our slight elevation in this area is based on the following factors:

1. Our continued development and expansion of our Cardiac Services has resulted in increased regional referrals of severely ill cardiac patients to our Medical Center.

2. More aggressive state-of-the-art cardiac treatment, such as TPA, is now being offered at the Medical Center.

We do not feel this slight range variance is significant.

The enclosed attachment outlines our corrections to the data you forwarded.

Sincerely yours,

John L. Bohrer
President

JB:mb:nc

Enclosure

ST MARGARETS HOSPITAL

600 E 1ST ST
SPRING VALLEY, IL 61362

Medicare Hospital Provider Number: 140143

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	790	12	10 - 15	815	12	11 - 17
Cancer	29	55	30 - 67	41	63	36 - 67
Cerebrovascular Accidents	41	27	15 - 43	56	13	19 - 39
Gastrointestinal Catastrophes	3	33	1 - 88	8	63	12 - 73
Infectious Disease	4	50	9 - 85	6	33	8 - 75
Metabolic/Electrolyte Disorders	17	18	14 - 55	17	12	13 - 50
Pulmonary Disease	45	22	14 - 41	45	22	15 - 42
Renal Failure	4	75	13 - 89	5	60	19 - 94
Severe Acute Heart Disease	21	33	18 - 58	27	37	21 - 57
Severe Chronic Heart Disease	37	22	11 - 39	37	32	11 - 42
Severe Trauma	4	0	6 - 72	1	0	1 - 97
Gastrointestinal Disease	100	3	1 - 11	93	1	1 - 8
Gynecologic Disease	9	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	86	5	1 - 13	97	3	2 - 11
Musculoskeletal/Skin Conditions	81	0	1 - 7	79	1	1 - 10
Neuropsychiatric/Sensory Disease	13	0	0 -100	15	0	0 - 96
Urologic Disease	55	0	0 - 16	40	2	0 - 39

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	120
Occupancy Rate (%):	55
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	63
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	0
Registered Nurses:	90
Licensed Practical Nurses:	1

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST MARY HOSPITAL

1415 VERMONT STREET
QUINCY, IL 62301

Medicare Hospital Provider Number: 140159

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,305	11	9 - 14	1,362	9	9 - 14
Cancer	30	40	28 - 64	35	37	22 - 56
Cerebrovascular Accidents	55	18	15 - 37	63	11	19 - 37
Gastrointestinal Catastrophes	10	30	13 - 68	9	33	10 - 68
Infectious Disease	26	19	21 - 55	27	30	19 - 56
Metabolic/Electrolyte Disorders	18	17	11 - 50	26	27	8 - 46
Pulmonary Disease	72	22	15 - 37	76	21	16 - 38
Renal Failure	6	67	10 - 80	2	0	8 - 92
Severe Acute Heart Disease	42	50	24 - 55	38	34	25 - 56
Severe Chronic Heart Disease	70	29	15 - 37	60	22	16 - 38
Severe Trauma	4	25	4 - 80	3	0	3 - 79
Gastrointestinal Disease	116	3	1 - 9	108	4	1 - 12
Gynecologic Disease	9	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	122	1	1 - 7	131	2	1 - 8
Musculoskeletal/Skin Conditions	116	1	1 - 7	127	3	0 - 10
Neuropsychiatric/Sensory Disease	79	1	0 - 12	107	0	1 - 6
Urologic Disease	56	4	0 - 36	63	3	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	210
Occupancy Rate (%):	59
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	88
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	91
Licensed Practical Nurses:	57

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST. MARY HOSPITAL
1415 VERMONT STREET, QUINCY, ILLINOIS 62301
217-223-1200

October 21, 1988

Ms. Sandra Kappert
Department of Health & Human Services
Health Care Financing Administration
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

We again appreciate the opportunity to express our concern in the anticipated release of mortality statistics by HCFA to the public.

As last year, we feel that the data does not consider the cause of death in the assigning cases to one of the 16 diagnostic categories. Patients who die in traffic accidents within 30 days after hospital admissions, for example, will bias the statistics in that category of disease for which they had been previously treated.

Also, the sample size causes concern in drawing conclusions in categories with small occurrences. How valid are the statistics in categories of 3 patients?

The third concern that continues from last year is that this data is being presented as a measurement of the quality of care. A valid measure of quality would be to look at each death, determine if death was inevitable and, if not, determine if management was appropriate. This is done through a peer review process and actually addresses quality whereas statistics only serve as possible indicators.

An added concern for this year's release to the public is the hospital characteristics (AHA annual survey of hospitals). We have two concerns with this information. The first is that HCFA has performed manipulations of the American Hospital Association's annual survey data so neither St. Mary nor AHA are able to determine if the statistics are correct. Secondly, the concern that the public may try to make correlations of quality of care to these statistics which may or may not be accurate.

Again this year St. Mary is well within the predicted range for mortality for all causes and the 16 diagnostic categories. We are committed to quality care for all our patients and have numerous peer review processes ongoing throughout the hospital and medical staff.

Thank you for the opportunity to comment on the statistics.

Sincerely,

James Strieby, President/CEO

JS/sf

ST MARY OF NAZARETH HOSPITAL CENTER

2233 W DIVISION ST
CHICAGO, IL 60622

Medicare Hospital Provider Number: 140180

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,284	13	10 - 15	1,435	11	9 - 14
Cancer	59	41	27 - 55	67	43	29 - 56
Cerebrovascular Accidents	49	29	14 - 40	47	26	16 - 42
Gastrointestinal Catastrophes	18	22	12 - 54	23	35	17 - 58
Infectious Disease	11	36	12 - 66	19	58	12 - 57
Metabolic/Electrolyte Disorders	31	26	13 - 48	21	14	9 - 45
Pulmonary Disease	49	29	14 - 41	41	37	10 - 41
Renal Failure	4	50	6 - 85	2	100	8 - 92
Severe Acute Heart Disease	63	43	26 - 52	54	46	25 - 52
Severe Chronic Heart Disease	66	23	12 - 33	62	19	13 - 35
Severe Trauma	2	0	1 - 90	4	25	4 - 80
Gastrointestinal Disease	94	3	1 - 12	114	2	1 - 8
Gynecologic Disease	6	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	235	4	2 - 8	229	2	2 - 6
Musculoskeletal/Skin Conditions	103	1	1 - 8	163	2	1 - 7
Neuropsychiatric/Sensory Disease	40	0	0 - 21	57	4	0 - 28
Urologic Disease	33	3	0 - 35	48	0	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	310
Occupancy Rate (%):	48
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	215
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	33
Registered Nurses:	270
Licensed Practical Nurses:	21

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Saint Mary of Nazareth Hospital Center

2233 West Division Street, Chicago, Illinois 60622 (312) 770-2000

October 21, 1988

William L. Roper, M.D.
Administrator
Health Care Finance Administration
Department of Health & Human Services
Hubert H. Humphrey Building
200 Independence Avenue SW
Washington, D.C. 20201

Dear Dr. Roper:

The Hospital Characteristics section of the Medicare Hospital Mortality Information Report is in error regarding the percentage of Board Certified physicians on the Staff of Saint Mary of Nazareth Hospital Center. Seventy-four percent of our physicians are Board Certified.

Sincerely.

Sister Stella Louise

Sister Stella Louise, C.S.F.N.
President

SSL:mr

ST MARY'S HOSPITAL

3333 NORTH SEMINARY
GALESBURG, IL 61401

Medicare Hospital Provider Number: 140064

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,265	12	10 - 15	1,340	12	10 - 15
Cancer	33	36	25 - 60	30	43	24 - 61
Cerebrovascular Accidents	45	24	19 - 45	47	30	19 - 46
Gastrointestinal Catastrophes	14	43	17 - 67	10	30	12 - 67
Infectious Disease	9	22	14 - 68	13	54	18 - 69
Metabolic/Electrolyte Disorders	20	40	14 - 58	23	35	11 - 52
Pulmonary Disease	63	25	16 - 40	65	31	18 - 43
Renal Failure	4	50	9 - 87	7	86	16 - 79
Severe Acute Heart Disease	44	50	26 - 56	41	61	29 - 60
Severe Chronic Heart Disease	64	22	14 - 35	78	17	14 - 32
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	112	6	1 - 13	109	1	1 - 7
Gynecologic Disease	20	0	0 -100	20	0	0 -100
Low-Risk Heart Disease	130	2	2 - 8	143	3	1 - 9
Musculoskeletal/Skin Conditions	138	4	1 - 9	165	1	1 - 6
Neuropsychiatric/Sensory Disease	33	3	0 - 43	35	0	0 - 22
Urologic Disease	81	0	1 - 7	85	1	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	159
Occupancy Rate (%):	51
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	88
Percent of Physicians Who Are Board Certified Specialists:	2
Interns and Residents:	0
Registered Nurses:	217
Licensed Practical Nurses:	46

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST. MARY'S HOSPITAL



RICHARD S. KOWALSKI
Administrator

October 20, 1988

Ms. Sandra Kappert
Health Standards and Quality Bureau, HCFA
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert,

We would like to take this opportunity to comment on the soon to be released 1986 and 1987 Mortality Statistics.

Our comments are primarily with the 1986 data. There has been a significant number of changes to the methodology used to calculate the ranges for predicted mortality. Additions and deletions of ICD-9-CM codes have been made to each diagnostic category. No patient specific information was given on the new 1986 sample population release. The patient totals are different from the previous release, and we have no way to determine the circumstances surrounding those admissions.

We were identified in the original 1986 release as having six cases in the Renal Disease category all of which were reviewed and felt to be terminal or pre-terminal during their last admission in 1986. The new release lists seven cases which now place us outside the Predicted Mortality Range. With such a small number of cases being considered in this category, it would appear that expected mortalities would be very difficult to predict. Your letter states "the fewer the number of cases included in a given diagnostic category, the greater the uncertainty of the expected mortality range, and therefore, the wider the range".

Secondly, the Severe Acute Heart Disease Category has a change in the number of cases being used to calculate the mortality rate. The patient-specific data is not available to make a determination about the cases. Again the ICD-9-CM codes included in the category have been changed. In this category we were one point outside the range in the 1986 release and now are within the range.

Thirdly, the Hospital characteristics taken from the AHA 1986 survey indicates our facility does not have a coronary care unit. St. Mary's hospital has had a combined Intensive and Coronary care unit since 1971. The listed bed size reflects only Medical-Surgical beds not the entire bed complement.

We are in agreement with your statement that mortality rates by themselves should not be used to judge quality of care. There are many complex issues that go into determining quality. One very large component is the severity of illness which has not been considered in this release.

The releasing of 1986 data with new methodology and not providing a means to examine the cases is a real concern for our institution.

Sincerely,

Richard S. Kowalski
Administrator

rs

ST MARYS HOSP

400 NORTH PLEASANT
CENTRALIA, IL 62801

Medicare Hospital Provider Number: 140034

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,583	12	10 - 15	1,570	13	10 - 14
Cancer	41	54	32 - 64	28	57	35 - 73
Cerebrovascular Accidents	40	38	17 - 47	41	27	18 - 46
Gastrointestinal Catastrophes	12	33	12 - 64	5	80	8 - 76
Infectious Disease	12	17	17 - 62	8	25	11 - 69
Metabolic/Electrolyte Disorders	24	25	15 - 53	42	43	15 - 48
Pulmonary Disease	109	19	20 - 38	89	33	18 - 40
Renal Failure	9	67	20 - 84	1	100	3 - 98
Severe Acute Heart Disease	54	56	27 - 54	54	52	30 - 57
Severe Chronic Heart Disease	78	21	16 - 36	84	26	13 - 33
Severe Trauma	2	0	1 - 89	3	33	1 - 88
Gastrointestinal Disease	127	6	1 - 12	104	5	1 - 12
Gynecologic Disease	17	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	244	3	2 - 7	216	3	2 - 7
Musculoskeletal/Skin Conditions	138	5	1 - 11	162	2	1 - 8
Neuropsychiatric/Sensory Disease	158	1	0 - 8	165	2	1 - 8
Urologic Disease	39	10	0 - 36	58	3	1 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	256
Occupancy Rate (%):	58
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	45
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	136
Licensed Practical Nurses:	41

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

ST MARYS HOSP

500 W COURT ST
KANKAKEE, IL 60901

Medicare Hospital Provider Number: 140155

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,795	13	10 - 14	1,795	12	10 - 15
Cancer	43	44	29 - 61	54	43	29 - 58
Cerebrovascular Accidents	83	23	17 - 37	74	30	17 - 39
Gastrointestinal Catastrophes	23	35	15 - 56	17	24	12 - 55
Infectious Disease	26	38	16 - 55	36	33	22 - 56
Metabolic/Electrolyte Disorders	34	35	14 - 49	39	21	15 - 46
Pulmonary Disease	100	25	15 - 34	115	27	17 - 36
Renal Failure	7	57	20 - 89	8	50	10 - 77
Severe Acute Heart Disease	67	45	27 - 53	64	38	28 - 53
Severe Chronic Heart Disease	88	27	14 - 34	92	27	15 - 34
Severe Trauma	12	58	10 - 64	4	25	2 - 81
Gastrointestinal Disease	128	3	1 - 10	123	4	1 - 11
Gynecologic Disease	16	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	238	3	2 - 7	211	3	1 - 7
Musculoskeletal/Skin Conditions	134	2	1 - 9	171	2	1 - 7
Neuropsychiatric/Sensory Disease	52	2	0 - 21	61	2	0 - 19
Urologic Disease	91	1	0 - 10	84	2	0 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	220
Occupancy Rate (%):	62
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	124
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	0
Registered Nurses:	164
Licensed Practical Nurses:	34

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No



St. Mary's Hospital

Medicare Provider #14-0155

HCFA MORTALITY DATA RELEASE

St. Mary's Hospital recognizes that the public is entitled to meaningful data concerning the quality of hospital care. However, simple death rates are not a true measure of quality care as a certain number of deaths are to be expected in any hospital depending on the age, condition and type of patients cared for. While it is acknowledged improvements have been made in the methodology that HCFA has employed, the interpretation of mortality rates requires the analysis of many additional variables to provide meaningful interpretation of the data. The Board of Directors of St. Mary's Hospital establishes, maintains and supports through the Chief Executive Officer and the President of the Medical Staff, a quality assurance program. Ongoing medical staff peer review assessments of patients treated are conducted through the quality assurance process. This quality of care review includes not only Medicare beneficiaries but all patients. All deaths are extensively reviewed. The information in turn is evaluated and followup is conducted by the Quality Assurance Committee of the Board of Directors.

ST MARYS HOSPITAL

111 E SPRING
STREATOR, IL 61364

Medicare Hospital Provider Number: 140026

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,391	10	11 - 15	1,378	11	11 - 16
Cancer	30	67	27 - 62	39	54	29 - 62
Cerebrovascular Accidents	46	11	19 - 40	51	24	17 - 42
Gastrointestinal Catastrophes	9	22	9 - 64	12	17	16 - 63
Infectious Disease	25	20	24 - 58	24	8	23 - 53
Metabolic/Electrolyte Disorders	33	12	11 - 41	55	9	12 - 36
Pulmonary Disease	89	28	19 - 40	92	21	19 - 39
Renal Failure	4	50	7 - 86	6	50	15 - 87
Severe Acute Heart Disease	52	50	31 - 59	53	38	27 - 54
Severe Chronic Heart Disease	107	10	17 - 30	84	29	13 - 34
Severe Trauma	1	100	2 - 97	0	-	-
Gastrointestinal Disease	133	2	2 - 9	113	4	2 - 10
Gynecologic Disease	21	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	182	1	2 - 6	185	1	2 - 6
Musculoskeletal/Skin Conditions	130	1	1 - 7	143	3	2 - 9
Neuropsychiatric/Sensory Disease	37	0	0 - 27	46	2	0 - 20
Urologic Disease	52	2	0 - 22	31	0	1 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	170
Occupancy Rate (%):	54
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	50
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	0
Registered Nurses:	119
Licensed Practical Nurses:	24

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST MARYS HOSPITAL

129 N 8TH ST
EAST SAINT LOUIS, IL 62201

Medicare Hospital Provider Number: 140066

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	891	9	8 - 13	872	10	9 - 14
Cancer	17	53	22 - 68	20	40	22 - 65
Cerebrovascular Accidents	33	33	14 - 46	28	14	15 - 43
Gastrointestinal Catastrophes	6	17	5 - 69	6	83	18 - 79
Infectious Disease	11	36	13 - 67	7	29	11 - 73
Metabolic/Electrolyte Disorders	20	40	11 - 55	31	26	16 - 51
Pulmonary Disease	40	22	18 - 45	61	16	14 - 36
Renal Failure	2	50	3 - 93	1	0	0 - 97
Severe Acute Heart Disease	22	36	23 - 62	27	44	22 - 59
Severe Chronic Heart Disease	56	7	14 - 31	44	14	12 - 34
Severe Trauma	0	-	-	2	50	0 - 96
Gastrointestinal Disease	37	0	1 - 15	34	3	0 - 28
Gynecologic Disease	8	13	0 -100	2	0	0 -100
Low-Risk Heart Disease	125	2	1 - 8	99	1	2 - 8
Musculoskeletal/Skin Conditions	57	0	0 - 12	50	2	0 - 23
Neuropsychiatric/Sensory Disease	143	0	0 - 7	143	1	0 - 9
Urologic Disease	25	4	0 - 34	30	7	1 - 33

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	273
Occupancy Rate (%):	58
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	54
Percent of Physicians Who Are Board Certified Specialists:	50
Interns and Residents:	0
Registered Nurses:	66
Licensed Practical Nurses:	32

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

St. Mary's Hospital of East St. Louis, Inc.
129 NORTH EIGHTH STREET, EAST ST. LOUIS, ILLINOIS 62201

PHILIP J. KARST, PhD
Executive Director
(618) 482-7025

September 22, 1988

William L. Roper, M.D.
Administrator
Department of Health & Human Services
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

I have received and reviewed your mortality data for St. Mary's Hospital of East St. Louis, Illinois. Although you have made efforts to improve your methodology, I believe that the economic environment in which the hospital serves is of significance as well. St. Mary's serves in an inner city location with many patients presenting themselves in our emergency room in very serious conditions, in a location where patients often are discharged without all of the support services found in most suburban settings. With the continuing financial squeeze the Medicare program has placed on physicians, hospitals, and patients, I was pleased to see that even with your imperfect measure, St. Mary's has continued to deliver high quality health care.

Very truly yours,

Philip J. Karst, Ph.D.
President

ap

ST MARYS HOSPITAL

1800 EAST LAKE SHORE DRIVE
DECATUR , IL 62525

Medicare Hospital Provider Number: 140166

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,647	10	9 - 13	2,773	11	9 - 13
Cancer	78	35	28 - 53	79	51	32 - 58
Cerebrovascular Accidents	107	28	18 - 37	97	35	18 - 39
Gastrointestinal Catastrophes	27	26	18 - 55	26	31	20 - 58
Infectious Disease	30	13	23 - 52	23	17	20 - 56
Metabolic/Electrolyte Disorders	19	32	6 - 51	18	17	6 - 47
Pulmonary Disease	103	24	16 - 35	121	18	19 - 36
Renal Failure	7	57	11 - 80	13	46	24 - 84
Severe Acute Heart Disease	79	38	30 - 53	89	47	29 - 52
Severe Chronic Heart Disease	123	28	16 - 33	154	28	18 - 34
Severe Trauma	4	0	7 - 72	6	17	7 - 71
Gastrointestinal Disease	229	1	1 - 6	243	2	1 - 6
Gynecologic Disease	40	0	0 -100	27	0	0 -100
Low-Risk Heart Disease	242	2	2 - 6	273	5	1 - 8
Musculoskeletal/Skin Conditions	335	2	1 - 5	334	1	1 - 5
Neuropsychiatric/Sensory Disease	131	2	1 - 9	159	1	0 - 7
Urologic Disease	128	2	1 - 8	108	2	1 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	377
Occupancy Rate (%):	68
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	128
Percent of Physicians Who Are Board Certified Specialists:	85
Interns and Residents:	6
Registered Nurses:	223
Licensed Practical Nurses:	117

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST THERESE MEDICAL CENTER

2615 WASHINGTON ST
WAUKEGAN, IL 60085

Medicare Hospital Provider Number: 140033

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,474	14	10 - 15	1,631	15	11 - 16
Cancer	54	57	31 - 60	81	62	32 - 57
Cerebrovascular Accidents	46	17	16 - 40	55	33	17 - 43
Gastrointestinal Catastrophes	10	30	9 - 65	20	45	16 - 60
Infectious Disease	27	26	18 - 54	41	27	21 - 52
Metabolic/Electrolyte Disorders	32	34	12 - 49	43	23	12 - 42
Pulmonary Disease	95	25	18 - 38	122	34	17 - 37
Renal Failure	9	78	15 - 77	10	20	12 - 72
Severe Acute Heart Disease	53	40	25 - 53	45	36	28 - 57
Severe Chronic Heart Disease	97	23	13 - 31	85	24	15 - 34
Severe Trauma	3	67	1 - 90	1	0	0 - 99
Gastrointestinal Disease	124	2	1 - 8	114	2	1 - 8
Gynecologic Disease	16	6	0 -100	18	0	0 -100
Low-Risk Heart Disease	179	3	1 - 8	183	4	1 - 9
Musculoskeletal/Skin Conditions	133	3	1 - 10	158	2	1 - 7
Neuropsychiatric/Sensory Disease	42	7	0 - 73	45	0	0 - 18
Urologic Disease	35	0	0 - 19	46	7	0 - 32

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	310
Occupancy Rate (%):	60
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	171
Percent of Physicians Who Are Board Certified Specialists:	56
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

saint therese medical center

2615 Washington Street • Waukegan, Illinois 60085 • (312) 249-3900

October 24, 1988

Ms. Sandra Kappert
Health Standards & Quality Bureau
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

Thank you for allowing us an opportunity to respond to HCFA's Medicare mortality information for the year 1987.

Please be advised that this information has been reviewed by a Committee of physicians, as well as our administrative staff. Outlined below is our response.

Overall, we are pleased that the results of the study indicate that Saint Therese Medical Center fell within the predicted range of mortality for all diagnostic cases with the exception of renal failure. After a review of the renal failure category, it was noted that this category contained only nine (9) cases and fell outside the predicted range of mortality by only one percentage point. The general concensus of our reviewing panel was that the cases falling within the renal failure category were treated in accordance with appropriate standards of care.

Additionally, the physicians felt that the mortality information may be more meaningful if hospital specific utilization rates (i.e., readmission/transfer) were included in conduction of analysis of the mortality information. However, the physicians were pleased to note that HCFA plans to severity adjust the Medicare mortality information in the future; this will make the information much more meaningful to physicians, as well as hospitals.

Thank you for your attention to this information. Should you have any questions, please do not hesitate to contact me at 312-360-2714.

Sincerely yours,

Timothy P. Selz, President
Saint Therese Medical Center

ST VINCENT MEMORIAL HOSP

201 EAST PLEASANT ST
TAYLORVILLE, IL 62568

Medicare Hospital Provider Number: 140102

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	726	13	10 - 16	805	12	10 - 15
Cancer	11	73	18 - 69	16	56	21 - 68
Cerebrovascular Accidents	32	38	13 - 47	16	38	16 - 61
Gastrointestinal Catastrophes	6	0	13 - 64	2	50	5 - 93
Infectious Disease	6	33	14 - 80	7	29	10 - 72
Metabolic/Electrolyte Disorders	11	36	4 - 62	11	36	9 - 64
Pulmonary Disease	63	19	16 - 39	45	22	15 - 42
Renal Failure	1	100	2 - 98	5	60	16 - 90
Severe Acute Heart Disease	24	54	25 - 64	30	47	23 - 59
Severe Chronic Heart Disease	40	22	14 - 41	32	34	13 - 46
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	73	3	0 - 15	75	5	2 - 15
Gynecologic Disease	8	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	116	2	2 - 8	136	3	2 - 9
Musculoskeletal/Skin Conditions	47	0	1 - 12	66	5	1 - 17
Neuropsychiatric/Sensory Disease	22	0	0 - 49	29	0	0 - 68
Urologic Disease	17	0	0 - 34	20	0	0 - 47

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	144
Occupancy Rate (%):	54
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	41
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SUBURBAN HOSP AND SANITARIUM COOK CN

55TH STREET AND COUNTY LINE RO
HINSDALE , IL 60521

Medicare Hospital Provider Number: 140297

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	386	17	10 - 18	429	14	10 - 17
Cancer	5	60	8 - 79	11	36	14 - 67
Cerebrovascular Accidents	13	31	10 - 59	8	50	10 - 71
Gastrointestinal Catastrophes	7	43	10 - 74	4	25	5 - 80
Infectious Disease	6	67	8 - 75	10	20	14 - 65
Metabolic/Electrolyte Disorders	13	54	9 - 62	17	35	10 - 57
Pulmonary Disease	45	36	15 - 45	39	33	16 - 47
Renal Failure	2	50	7 - 97	3	67	11 - 94
Severe Acute Heart Disease	10	20	20 - 69	8	25	19 - 75
Severe Chronic Heart Disease	18	39	9 - 53	21	29	6 - 46
Severe Trauma	0	-	-	1	0	0 - 98
Gastrointestinal Disease	34	0	1 - 15	31	3	0 - 36
Gynecologic Disease	2	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	49	6	0 - 27	64	3	1 - 14
Musculoskeletal/Skin Conditions	44	2	0 - 22	34	0	0 - 18
Neuropsychiatric/Sensory Disease	4	0	0 -100	9	0	0 -100
Urologic Disease	15	0	0 - 69	15	0	0 - 89

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	199
Ownership/Control:	District/Authority

STAFFING

Interns and Residents:	0
Registered Nurses:	73
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

SWEDISH AMERICAN HOSPITAL

1400 CHARLES ST
ROCKFORD, IL 61104

Medicare Hospital Provider Number: 140228

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,631	12	10 - 14	2,623	13	10 - 14
Cancer	99	44	30 - 54	119	49	32 - 54
Cerebrovascular Accidents	85	26	18 - 38	68	32	18 - 41
Gastrointestinal Catastrophes	34	41	21 - 58	30	37	18 - 56
Infectious Disease	38	16	21 - 49	33	48	20 - 56
Metabolic/Electrolyte Disorders	37	32	14 - 49	49	24	14 - 44
Pulmonary Disease	125	21	17 - 34	106	32	19 - 39
Renal Failure	7	57	19 - 87	6	33	9 - 80
Severe Acute Heart Disease	107	31	26 - 46	93	41	29 - 51
Severe Chronic Heart Disease	130	27	15 - 32	133	20	16 - 32
Severe Trauma	9	11	11 - 62	7	14	7 - 66
Gastrointestinal Disease	217	3	1 - 7	193	5	2 - 9
Gynecologic Disease	30	0	0 -100	28	0	0 -100
Low-Risk Heart Disease	409	3	2 - 6	343	4	2 - 7
Musculoskeletal/Skin Conditions	237	4	1 - 7	227	1	1 - 5
Neuropsychiatric/Sensory Disease	68	4	0 - 25	149	1	1 - 7
Urologic Disease	114	4	0 - 13	112	2	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	393
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	180
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	0
Registered Nurses:	284
Licensed Practical Nurses:	49

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SwedishAmerican
PEOPLE WHO CARE

Robert B. Klint, M.D., M.H.A.
Executive Vice President

October 19, 1988

Health Care Financing Administration
Health Stadars and Quality Bureau
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert: Medicare Provider No. 140228

Following careful review of the Medicare Hospital Mortality Information, I wish to comment on several items and to correct our "Hospital Characteristics."

Hospital Characteristics

Beds and Staffing: Our AHA survey statistics have been abridged without the provision of an explanation. Our total bed complement is 393; the medical-surgical component is 192. The HCFA report identifies the number of beds as 192. The occupancy rate published is identical to the figure we submitted to AHA (64%), but, we based this on 393 beds. Our registered nurse count submitted to AHA was based on staffing of 393 beds. The HCFA report compared total registered nurses to be a denominator of 192 beds rather than 393 beds. I believe this gives an impression of over-staffing. Our ratio of registered nurses per bed in 1986 was actually .71 and not 1.45 as indicated on the mortality report.

Specialty Services: The HCFA report indicates absence of a coronary care unit. In 1986 and presently, we have a 10 bed intensive care unit and a separate 10 bed coronary care unit. I would like to see our distinct psychiatric unit identified as a special care unit since we treat a high volume of Medicare patients.

Ownership/control: The HCFA report uses terminology of "private, non-profit" in describing this hospital. According to AHA, we are actually "nongovernment, not for profit" which places us in a category of "other." We are not designated as a private hospital.

While SwedishAmerican Hospital's mortality rates appear to be comfortably within all ranges, we remain skeptical of the value and merits of publishing these statistics as currently obtained. Even though qualifiers were supplied in conjunction with last year's data, the media focused on the statistics at face value.

We again request that HCFA preface the December release with a highlighted statement that the predicted mortality range is based on a probability model only, that the data is not converted for severity or disease staging, and that the quality cannot be accurately assessed by surveying mortality alone.

The difference between the predicted mortality range and the hospital specific rate computed by HCFA (which obviously does not correlate with our inpatient mortality rate) may elicit unwarranted concern by the community we serve. Those of us in the health care field recognize that determination of whether the difference is due to patient characteristics (severity of disease, previous health care status, availability of post-hospital care, etc.) or is due to the care provided can only be accomplished by the most careful examination of the record.

Internally, the medical staff and the hospital staff have already conducted this examination. Each clinical discipline reviews the medical records monthly. All aspects of care are reviewed as an education tool and as an assessment of our quality of care.

We do have reservations about the HCFA model itself which:

1. attributes post-hospital deaths back to the discharging hospital,

2. cannot capture cause of death as a factor,

3. cannot yet include severity as a factor, and

4. includes categories that are of questionable statistical validity (two categories have less than 10 patients) and yet arrives at an "actual mortality rate."

In order to correctly analyze mortality rates at SwedishAmerican Hospital, the mortality model would have to reflect the services we do provide. Basically, we offer all medical, surgical, psychiatric, and obstetric services, in addition to adolescent chemical dependence treatment.

We experience a high referral rate with high risk and elderly patients into our full-service cardiovascular and cancer programs. Our special outpatient clinics for pulmonary medicine and gastrointestinal disease also have a high Medicare composition that results in referral to the acute care facility.

Thank you for the opportunity to review and reflect on the 1988 mortality data.

Sincerely,

Robert B. Klint, M.D.,M.H.A.

RBK/ps

SWEDISH COVENANT HOSPITAL

5145 N CALIFORNIA AVE
CHICAGO, IL 60625

Medicare Hospital Provider Number: 140114

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,092	15	12 - 16	2,068	15	12 - 17
Cancer	51	45	27 - 57	71	31	28 - 54
Cerebrovascular Accidents	111	25	20 - 38	123	28	21 - 39
Gastrointestinal Catastrophes	13	46	19 - 71	17	65	18 - 64
Infectious Disease	28	43	21 - 59	22	36	17 - 59
Metabolic/Electrolyte Disorders	23	39	9 - 52	29	17	11 - 44
Pulmonary Disease	122	39	22 - 42	139	35	23 - 42
Renal Failure	12	58	19 - 79	9	67	21 - 85
Severe Acute Heart Disease	99	45	31 - 53	84	52	32 - 55
Severe Chronic Heart Disease	136	23	16 - 31	145	23	17 - 33
Severe Trauma	12	17	12 - 60	6	0	10 - 62
Gastrointestinal Disease	157	1	2 - 7	146	5	1 - 10
Gynecologic Disease	14	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	284	5	2 - 8	255	4	2 - 7
Musculoskeletal/Skin Conditions	185	4	1 - 9	197	3	1 - 7
Neuropsychiatric/Sensory Disease	34	0	0 - 26	43	0	0 - 14
Urologic Disease	108	4	0 - 17	110	3	1 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	261
Occupancy Rate (%):	80
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	104
Percent of Physicians Who Are Board Certified Specialists:	80
Interns and Residents:	12
Registered Nurses:	256
Licensed Practical Nurses:	35

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Swedish Covenant Hospital
5145 North California Avenue
Chicago, Illinois 60625
(312) 878-8200

M/C Provider
#140114

We cannot comment on the HCFA summary of 1986 data since HCFA revised its methodology and modified the DRG categories, but did not provide us with the revised individual statistics to verify and analyze.

The 1987 mortality statistics indicate that Swedish Covenant Hospital's mortality rates fall within the predicted mortality range for all deaths and for the specific diagnoses. Further, the 15% overall mortality rate reveals 10% of the deaths were attributed to high risk diseases such as cancer and severe heart disease; approximately 1.5% of the deaths were attributed to low risk disease such as gastrointestinal and urologic disease; and approximately 3.5% of the deaths were attributed to other disease processes than those chosen by HCFA for its study. The average age per category was 82 years for high risk and low risk categories and 73 years for the "other" category.

SYCAMORE MUNICIPAL HOSPITAL

225 EDWARD STREET
SYCAMORE, IL 60178

Medicare Hospital Provider Number: 140142

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	137	15	5 - 18	223	11	11 - 20
Cancer	4	75	9 - 82	6	17	11 - 72
Cerebrovascular Accidents	0	-	-	10	30	10 - 64
Gastrointestinal Catastrophes	2	0	2 - 89	1	0	3 - 98
Infectious Disease	1	0	1 - 97	4	0	10 - 74
Metabolic/Electrolyte Disorders	3	33	1 - 88	3	33	10 - 91
Pulmonary Disease	9	0	9 - 47	13	38	9 - 60
Renal Failure	0	-	-	1	100	0 -100
Severe Acute Heart Disease	4	75	7 - 81	17	29	17 - 59
Severe Chronic Heart Disease	3	33	0 - 92	10	20	6 - 58
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	25	4	0 - 86	24	4	0 - 39
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	13	15	0 - 80	26	0	0 - 24
Musculoskeletal/Skin Conditions	14	14	0 - 97	15	7	0 - 66
Neuropsychiatric/Sensory Disease	5	20	0 -100	1	0	0 -100
Urologic Disease	6	0	0 -100	11	0	0 - 82

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	50
Occupancy Rate (%):	(not available)
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

THE HOSP OF ENGLEWOOD

6001 S GREEN STREET
CHICAGO, IL 60621

Medicare Hospital Provider Number: 140136

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	308	13	9 - 17	314	13	8 - 16
Cancer	4	25	6 - 80	7	57	14 - 78
Cerebrovascular Accidents	21	19	8 - 44	19	26	9 - 49
Gastrointestinal Catastrophes	1	0	0 - 99	3	33	3 - 86
Infectious Disease	1	0	0 - 98	5	40	3 - 78
Metabolic/Electrolyte Disorders	15	7	10 - 47	10	20	6 - 60
Pulmonary Disease	23	17	14 - 47	21	14	8 - 42
Renal Failure	3	33	8 - 90	2	50	3 - 93
Severe Acute Heart Disease	22	45	18 - 58	15	47	19 - 66
Severe Chronic Heart Disease	20	15	7 - 42	9	33	4 - 64
Severe Trauma	1	0	0 - 99	1	0	0 - 99
Gastrointestinal Disease	17	6	0 - 55	17	6	0 - 68
Gynecologic Disease	1	0	0 -100	0	-	-
Low-Risk Heart Disease	36	6	0 - 59	58	5	0 - 24
Musculoskeletal/Skin Conditions	29	3	0 - 84	26	0	0 - 95
Neuropsychiatric/Sensory Disease	7	0	0 -100	4	0	0 -100
Urologic Disease	2	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	145
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	96
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

THOMAS H BOYD MEMORIAL HOSPITAL ASSO

800 SCHOOL STREET
CARROLLTON, IL 62016

Medicare Hospital Provider Number: 140188

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	168	20	10 - 23	158	20	9 - 23
Cancer	4	75	16 - 89	3	67	12 - 93
Cerebrovascular Accidents	13	46	11 - 62	6	67	2 - 74
Gastrointestinal Catastrophes	2	50	8 - 97	0	-	-
Infectious Disease	1	0	0 - 99	0	-	-
Metabolic/Electrolyte Disorders	5	20	4 - 74	9	11	2 - 60
Pulmonary Disease	20	45	15 - 57	28	39	18 - 54
Renal Failure	1	100	1 - 97	2	100	6 - 91
Severe Acute Heart Disease	3	100	9 - 82	7	43	13 - 76
Severe Chronic Heart Disease	9	33	7 - 65	5	40	3 - 77
Severe Trauma	1	0	3 - 98	0	-	-
Gastrointestinal Disease	10	0	0 -100	8	0	0 -100
Gynecologic Disease	0	-	-	1	0	0 -100
Low-Risk Heart Disease	20	0	0 - 33	20	5	0 - 61
Musculoskeletal/Skin Conditions	11	0	0 - 94	12	8	0 - 99
Neuropsychiatric/Sensory Disease	7	14	0 -100	3	0	0 -100
Urologic Disease	3	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	73
Occupancy Rate (%):	58
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	20
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	11
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

THOREK HOSPITAL AND MEDICAL CENTER

850 W IRVING PARK RD
CHICAGO, IL 60613

Medicare Hospital Provider Number: 140115

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	465	10	9 - 15	496	9	8 - 14
Cancer	12	33	26 - 76	11	9	21 - 63
Cerebrovascular Accidents	11	0	12 - 44	10	0	10 - 44
Gastrointestinal Catastrophes	4	25	3 - 80	1	0	0 - 99
Infectious Disease	4	0	9 - 73	4	50	8 - 84
Metabolic/Electrolyte Disorders	3	0	3 - 79	4	25	0 - 92
Pulmonary Disease	23	35	19 - 58	20	20	9 - 47
Renal Failure	2	0	0 - 98	4	25	8 - 85
Severe Acute Heart Disease	15	67	22 - 68	10	70	17 - 70
Severe Chronic Heart Disease	25	32	8 - 45	29	24	12 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	40	0	0 - 18	47	2	1 - 16
Gynecologic Disease	10	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	55	5	0 - 23	82	1	1 - 9
Musculoskeletal/Skin Conditions	64	0	0 - 9	57	4	0 - 29
Neuropsychiatric/Sensory Disease	9	0	0 - 85	22	0	1 - 25
Urologic Disease	12	0	0 - 87	19	0	0 - 53

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	218
Occupancy Rate (%):	53
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	266
Percent of Physicians Who Are Board Certified Specialists:	55
Interns and Residents:	4
Registered Nurses:	77
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

UMWA UNION HOSPITAL

507 W ST LOUIS ST
WEST FRANKFORT, IL 62896

Medicare Hospital Provider Number: 140215

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	510	16	9 - 16	507	15	10 - 17
Cancer	10	50	18 - 74	7	57	11 - 75
Cerebrovascular Accidents	18	39	12 - 56	12	8	12 - 51
Gastrointestinal Catastrophes	1	100	0 - 98	2	50	1 - 92
Infectious Disease	11	36	12 - 66	21	38	18 - 60
Metabolic/Electrolyte Disorders	13	54	6 - 60	13	31	4 - 58
Pulmonary Disease	35	34	13 - 45	45	24	14 - 41
Renal Failure	2	0	4 - 90	4	50	10 - 89
Severe Acute Heart Disease	22	45	22 - 63	24	25	20 - 55
Severe Chronic Heart Disease	31	23	12 - 43	27	41	11 - 48
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	47	2	1 - 18	38	3	0 - 28
Gynecologic Disease	5	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	97	5	1 - 13	95	5	1 - 14
Musculoskeletal/Skin Conditions	35	3	0 - 32	26	8	0 - 56
Neuropsychiatric/Sensory Disease	7	0	0 -100	5	0	0 -100
Urologic Disease	18	6	0 - 56	22	18	0 - 70

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	42
Occupancy Rate (%):	62
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	9
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	29
Licensed Practical Nurses:	20

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

UNION COUNTY HOSPITAL

517 N MAIN STREET
ANNA, IL 62906

Medicare Hospital Provider Number: 140170

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	483	10	8 - 14	407	13	8 - 16
Cancer	8	50	17 - 78	6	50	9 - 77
Cerebrovascular Accidents	21	38	9 - 51	17	47	12 - 58
Gastrointestinal Catastrophes	1	0	0 - 99	2	0	6 - 90
Infectious Disease	5	20	8 - 76	6	67	6 - 74
Metabolic/Electrolyte Disorders	8	0	2 - 52	10	20	5 - 59
Pulmonary Disease	51	25	14 - 40	54	17	13 - 36
Renal Failure	0	-	-	2	100	7 - 92
Severe Acute Heart Disease	10	30	14 - 68	6	33	16 - 81
Severe Chronic Heart Disease	27	30	11 - 46	16	31	9 - 54
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	31	0	0 - 24	38	0	0 - 16
Gynecologic Disease	5	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	57	2	1 - 14	37	8	0 - 33
Musculoskeletal/Skin Conditions	49	4	0 - 43	51	4	0 - 29
Neuropsychiatric/Sensory Disease	18	0	0 -100	14	7	0 - 98
Urologic Disease	34	0	0 - 22	10	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	100
Occupancy Rate (%):	78
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	11
Percent of Physicians Who Are Board Certified Specialists:	45
Interns and Residents:	0
Registered Nurses:	27
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

UNITED SAMARITANS MC SAGER FAC

600 SAGER
DANVILLE, IL 61832

Medicare Hospital Provider Number: 140093

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,499	13	9 - 14	1,692	14	9 - 14
Cancer	50	42	26 - 56	67	55	31 - 58
Cerebrovascular Accidents	58	34	14 - 40	64	33	16 - 41
Gastrointestinal Catastrophes	9	22	10 - 65	7	43	7 - 73
Infectious Disease	9	44	11 - 70	10	70	16 - 71
Metabolic/Electrolyte Disorders	25	4	7 - 35	18	33	9 - 55
Pulmonary Disease	117	25	17 - 36	99	18	18 - 36
Renal Failure	4	25	4 - 82	8	50	9 - 77
Severe Acute Heart Disease	61	48	25 - 51	71	48	25 - 50
Severe Chronic Heart Disease	86	23	13 - 33	74	24	14 - 35
Severe Trauma	1	0	2 - 97	1	0	0 - 97
Gastrointestinal Disease	131	4	1 - 11	123	2	1 - 9
Gynecologic Disease	16	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	154	4	1 - 9	216	8	1 - 10
Musculoskeletal/Skin Conditions	122	2	0 - 15	141	4	0 - 11
Neuropsychiatric/Sensory Disease	139	1	0 - 9	115	3	0 - 12
Urologic Disease	60	2	0 - 37	59	5	0 - 41

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	236
Ownership/Control:	Church

STAFFING

Interns and Residents:	0
Registered Nurses:	924
Licensed Practical Nurses:	38

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	Yes

UNITED SAMARITANS MEDICAL CENTER

Sager Campus

600 Sager Avenue
Danville, Illinois 61832

(217) 442-6300

October 27, 1988

Health Standards and Quality Bureau, HCFA
Attn: Paul Elstein
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mr. Elstein:

This year, 10 of 32 categories rose, while 22 of 32 declined from last year, reflecting these fluctuations. This year, at both Logan and Sager Campuses, only one category (cancer) was over the range for predicted mortality rate and that was by one percentage point. We attribute this increase to a sizeable cancer program consisting of the following:

1. Hospice Program, which is prominently utilized by cancer patients.

2. Operation of the Cancer Center, serving approximately a sixty mile radius.

3. Course of treatment the patient has chosen.

4. Delineation of patients admitted for terminal cancer.

5. A higher percentage of elderly population in our service area.

It is important that the public has an understanding of the shortcomings of this data. This information would be useful to help and hospital focus its quality assurance activities, but should not be used as a basis for judging the quality of care. The following are the areas of concern that might cause a misunderstanding by the public:

1. A 30 day post admission mortality rate falsely attributes to the hospital all deaths, even if unrelated to the condition of the patient at the time of discharge.

2. Using the last admission, the sample of cases examined is biased towards those resulting in death, which will overstate the probability of having a hospital stay result in death.

3. No allowance has been made for severity of illness within a diagnosis or

3. No allowance has been made for severity of illness within a diagnosis or number of patients.

4. Statistical analyses, computing mortality rates do not measure quality of care.

Larry Hurley
Director, Risk Management
A Division of the Franciscan Sisters Health Care Corporation

UNITED SAMARITANS ME LOGAN FAC

812 NORTH LOGAN AVE
DANVILLE , IL 61832

Medicare Hospital Provider Number: 140219

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,248	18	10 - 16	1,205	15	10 - 15
Cancer	46	57	25 - 56	36	58	26 - 60
Cerebrovascular Accidents	39	41	14 - 45	54	39	15 - 42
Gastrointestinal Catastrophes	17	35	14 - 61	11	27	14 - 67
Infectious Disease	22	36	20 - 61	19	53	16 - 61
Metabolic/Electrolyte Disorders	11	36	6 - 62	20	25	9 - 51
Pulmonary Disease	92	27	17 - 38	86	22	15 - 35
Renal Failure	9	56	19 - 84	10	50	10 - 74
Severe Acute Heart Disease	48	48	26 - 55	46	57	25 - 54
Severe Chronic Heart Disease	78	26	14 - 35	46	26	13 - 39
Severe Trauma	0	-	-	1	0	2 - 97
Gastrointestinal Disease	105	4	1 - 11	112	5	1 - 13
Gynecologic Disease	11	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	145	4	1 - 10	132	5	1 - 11
Musculoskeletal/Skin Conditions	70	1	1 - 12	79	4	0 - 18
Neuropsychiatric/Sensory Disease	53	4	0 - 21	52	2	0 - 22
Urologic Disease	67	1	0 - 23	47	0	1 - 12

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	245
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	150
Licensed Practical Nurses:	67

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

UNITED SAMARITANS MEDICAL CENTER

Sager Campus

600 Sager Avenue
Danville, Illinois 61832

(217) 442-6300

October 27, 1988

Health Standards and Quality Bureau, HCFA
Attn: Paul Elstein
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mr. Elstein:

This year, 10 of 32 categories rose, while 22 of 32 declined from last year, reflecting these fluctuations. This year, at both Logan and Sager Campuses, only one category (cancer) was over the range for predicted mortality rate and that was by one percentage point. We attribute this increase to a sizeable cancer program consisting of the following:

1. Hospice Program, which is prominently utilized by cancer patients.

2. Operation of the Cancer Center, serving approximately a sixty mile radius.

3. Course of treatment the patient has chosen.

4. Delineation of patients admitted for terminal cancer.

5. A higher percentage of elderly population in our service area.

It is important that the public has an understanding of the shortcomings of this data. This information would be useful to help and hospital focus its quality assurance activities, but should not be used as a basis for judging the quality of care. The following are the areas of concern that might cause a misunderstanding by the public:

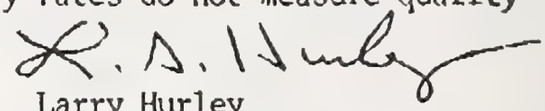
1. A 30 day post admission mortality rate falsely attributes to the hospital all deaths, even if unrelated to the condition of the patient at the time of discharge.

2. Using the last admission, the sample of cases examined is biased towards those resulting in death, which will overstate the probability of having a hospital stay result in death.

3. No allowance has been made for severity of illness within a diagnosis or

3. No allowance has been made for severity of illness within a diagnosis or number of patients.

4. Statistical analyses, computing mortality rates do not measure quality of care.



Larry Hurley
Director, Risk Management

A Division of the Franciscan Sisters Health Care Corporation

UNIVERSITY OF CHICAGO MEDICAL CENTER

5841 SOUTH MARYLAND
CHICAGO, IL 60637

Medicare Hospital Provider Number: 140088

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,340	11	10 - 15	2,396	11	11 - 15
Cancer	116	37	33 - 55	151	40	37 - 58
Cerebrovascular Accidents	74	19	17 - 37	77	29	17 - 39
Gastrointestinal Catastrophes	32	25	17 - 51	32	41	19 - 56
Infectious Disease	22	45	12 - 54	13	62	14 - 65
Metabolic/Electrolyte Disorders	41	24	14 - 46	34	24	9 - 43
Pulmonary Disease	84	25	18 - 39	71	24	19 - 41
Renal Failure	24	17	6 - 57	40	13	7 - 55
Severe Acute Heart Disease	86	23	27 - 47	82	28	28 - 50
Severe Chronic Heart Disease	86	10	16 - 31	91	15	17 - 34
Severe Trauma	11	36	7 - 64	17	41	12 - 60
Gastrointestinal Disease	111	4	1 - 11	124	2	2 - 9
Gynecologic Disease	18	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	220	5	2 - 8	205	9	1 - 11
Musculoskeletal/Skin Conditions	208	3	1 - 7	203	2	1 - 6
Neuropsychiatric/Sensory Disease	147	2	1 - 8	151	2	0 - 9
Urologic Disease	72	1	0 - 14	102	1	1 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	537
Occupancy Rate (%):	85
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	535
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	430
Registered Nurses:	732
Licensed Practical Nurses:	85

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

UNIVERSITY OF ILLINOIS HOSPITAL

1740 WEST TAYLOR ST
CHICAGO, IL 60612

Medicare Hospital Provider Number: 140150

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,357	9	7 - 12	1,500	8	7 - 11
Cancer	65	45	27 - 54	57	33	27 - 54
Cerebrovascular Accidents	41	10	14 - 35	47	19	14 - 38
Gastrointestinal Catastrophes	19	42	14 - 59	5	0	7 - 65
Infectious Disease	1	0	0 - 99	7	43	10 - 74
Metabolic/Electrolyte Disorders	18	28	7 - 52	24	17	7 - 43
Pulmonary Disease	36	14	12 - 38	42	12	11 - 34
Renal Failure	35	0	1 - 56	30	10	2 - 57
Severe Acute Heart Disease	30	37	20 - 55	34	44	24 - 57
Severe Chronic Heart Disease	41	17	9 - 34	42	10	12 - 33
Severe Trauma	1	0	0 -100	0	-	-
Gastrointestinal Disease	44	2	0 - 22	68	0	1 - 8
Gynecologic Disease	8	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	97	3	1 - 11	123	3	1 - 10
Musculoskeletal/Skin Conditions	129	2	0 - 9	148	3	0 - 10
Neuropsychiatric/Sensory Disease	168	2	0 - 9	177	0	0 - 5
Urologic Disease	51	6	0 - 73	54	2	0 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	440
Occupancy Rate (%):	72
Ownership/Control:	State Government

STAFFING

Total Number of Physicians:	396
Percent of Physicians Who Are Board Certified Specialists:	53
Interns and Residents:	305
Registered Nurses:	544
Licensed Practical Nurses:	67

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

UNIVERSITY OF ILLINOIS HOSPITAL & CLINICS

COMMENT ON HCFA MORTALITY DATA

The actual mortality rates for the University of Illinois Hospital fell within the predicted range for the categories studied. However, UIH maintains that the methodology for the HCFA statistical model remains flawed.

Over 50,000 different manisfestations of illness and 10,000 different diagnostic categories have been compressed into seventeen categories from which death rates have been calculated for each hospital and compared with calculated ranges. What is not taken into account and reflected in these categories is the degree that the comorbidity may contribute to patients overall conditions.

The University of Illinois Hospital is in favor of outcome measures such as mortality rates, however the problem is that broad groups of patients cannot be accurately compared, because of the great variability of diagnoses and associated comorbidity within groups.

VICTORY MEMORIAL HOSPITAL

1324 NORTH SHERIDAN ROAD
WAUKEGAN, IL 60085

Medicare Hospital Provider Number: 140084

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,847	11	10 - 15	1,877	12	11 - 15
Cancer	49	29	27 - 55	44	27	25 - 54
Cerebrovascular Accidents	72	28	18 - 40	78	27	18 - 39
Gastrointestinal Catastrophes	22	23	18 - 56	12	33	9 - 62
Infectious Disease	20	15	20 - 55	22	45	19 - 62
Metabolic/Electrolyte Disorders	37	16	15 - 45	48	29	12 - 43
Pulmonary Disease	93	25	18 - 38	128	32	18 - 37
Renal Failure	15	27	11 - 67	16	31	19 - 76
Severe Acute Heart Disease	71	45	27 - 52	65	35	30 - 55
Severe Chronic Heart Disease	96	21	15 - 33	103	23	16 - 34
Severe Trauma	1	100	1 - 97	4	50	5 - 83
Gastrointestinal Disease	145	3	2 - 10	126	4	2 - 11
Gynecologic Disease	19	0	0 -100	25	0	0 - 93
Low-Risk Heart Disease	222	2	2 - 7	240	2	2 - 7
Musculoskeletal/Skin Conditions	225	1	1 - 6	216	3	1 - 7
Neuropsychiatric/Sensory Disease	55	4	1 - 19	65	5	1 - 18
Urologic Disease	65	2	0 - 13	60	2	0 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	315
Occupancy Rate (%):	61
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	134
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	248
Licensed Practical Nurses:	35

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WABASH GENERAL HOSPITAL DISTRICT

1418 COLLEGE DR
MT CARMEL, IL 62863

Medicare Hospital Provider Number: 140129

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	448	14	11 - 19	439	15	9 - 17
Cancer	7	43	15 - 79	4	50	7 - 84
Cerebrovascular Accidents	19	26	10 - 50	20	25	14 - 52
Gastrointestinal Catastrophes	7	29	11 - 73	6	17	6 - 69
Infectious Disease	17	59	16 - 62	9	22	12 - 66
Metabolic/Electrolyte Disorders	9	33	10 - 68	9	22	2 - 66
Pulmonary Disease	42	33	18 - 48	30	43	13 - 49
Renal Failure	4	50	6 - 85	3	67	10 - 92
Severe Acute Heart Disease	16	19	22 - 62	19	37	23 - 65
Severe Chronic Heart Disease	26	12	14 - 41	14	21	7 - 52
Severe Trauma	0	-	-	1	0	2 - 97
Gastrointestinal Disease	29	0	1 - 19	30	7	0 - 68
Gynecologic Disease	7	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	59	0	1 - 9	67	3	1 - 14
Musculoskeletal/Skin Conditions	28	0	0 - 37	26	0	0 - 33
Neuropsychiatric/Sensory Disease	8	0	0 -100	17	0	0 - 96
Urologic Disease	3	0	0 -100	2	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	64
Occupancy Rate (%):	72
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	12
Percent of Physicians Who Are Board Certified Specialists:	17
Interns and Residents:	0
Registered Nurses:	32
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WALTHER MEM HOSP

1116 N KEDZIE AVE
CHICAGO, IL 60651

Medicare Hospital Provider Number: 140111

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	55	11	3 - 22	393	9	7 - 13
Cancer	0	-	-	5	40	4 - 77
Cerebrovascular Accidents	2	100	2 - 88	8	0	16 - 56
Gastrointestinal Catastrophes	0	-	-	5	20	7 - 75
Infectious Disease	0	-	-	1	100	1 - 97
Metabolic/Electrolyte Disorders	0	-	-	13	31	6 - 58
Pulmonary Disease	2	50	2 - 92	20	15	10 - 45
Renal Failure	0	-	-	1	0	0 -100
Severe Acute Heart Disease	3	67	10 - 90	11	55	13 - 67
Severe Chronic Heart Disease	3	0	1 - 86	32	22	10 - 40
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	4	0	0 -100	37	3	0 - 40
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	6	0	0 -100	57	4	1 - 17
Musculoskeletal/Skin Conditions	8	0	0 -100	42	0	0 - 37
Neuropsychiatric/Sensory Disease	1	0	0 -100	10	0	0 -100
Urologic Disease	4	0	0 -100	23	0	0 - 72

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	211
Ownership/Control:	Church

STAFFING

Interns and Residents:	0
Registered Nurses:	91
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WASHINGTON COUNTY HOSPITAL

603 S GRAND
NASHVILLE, IL 62263

Medicare Hospital Provider Number: 140069

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	349	17	12 - 20	389	20	14 - 23
Cancer	9	44	17 - 75	9	44	22 - 80
Cerebrovascular Accidents	20	15	14 - 47	26	23	15 - 48
Gastrointestinal Catastrophes	0	-	-	1	0	2 - 97
Infectious Disease	2	100	10 - 94	0	-	-
Metabolic/Electrolyte Disorders	13	15	10 - 54	25	20	14 - 50
Pulmonary Disease	49	41	19 - 48	61	41	19 - 46
Renal Failure	5	0	19 - 81	0	-	-
Severe Acute Heart Disease	11	45	13 - 67	21	62	24 - 65
Severe Chronic Heart Disease	27	37	13 - 49	26	27	13 - 47
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	27	7	0 - 61	29	3	1 - 27
Gynecologic Disease	1	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	40	0	1 - 13	36	0	2 - 14
Musculoskeletal/Skin Conditions	35	3	0 - 39	36	3	0 - 28
Neuropsychiatric/Sensory Disease	10	0	0 -100	7	0	0 -100
Urologic Disease	3	0	0 -100	7	0	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	68
Occupancy Rate (%):	24
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	5
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	0
Registered Nurses:	23
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WEST SUBURBAN HOSPITAL MEDICAL CENTE

ERIE AT AUSTIN BOULEVARD
OAK PARK , IL 60302

Medicare Hospital Provider Number: 140049

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,187	11	11 - 15	2,332	12	11 - 15
Cancer	103	42	30 - 53	112	41	29 - 51
Cerebrovascular Accidents	98	19	19 - 37	62	26	18 - 41
Gastrointestinal Catastrophes	19	42	18 - 62	24	38	18 - 58
Infectious Disease	43	35	27 - 59	40	27	23 - 55
Metabolic/Electrolyte Disorders	15	13	6 - 48	34	21	15 - 47
Pulmonary Disease	118	25	20 - 38	132	28	19 - 38
Renal Failure	9	33	14 - 77	16	25	12 - 68
Severe Acute Heart Disease	79	39	28 - 51	77	35	29 - 52
Severe Chronic Heart Disease	144	15	16 - 30	111	16	17 - 33
Severe Trauma	3	67	4 - 86	8	25	9 - 69
Gastrointestinal Disease	176	3	2 - 8	195	4	1 - 9
Gynecologic Disease	17	12	0 -100	16	6	0 -100
Low-Risk Heart Disease	241	3	1 - 7	229	4	1 - 7
Musculoskeletal/Skin Conditions	245	4	1 - 7	260	3	1 - 6
Neuropsychiatric/Sensory Disease	46	0	1 - 13	59	0	0 - 10
Urologic Disease	113	3	0 - 12	117	3	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	372
Occupancy Rate (%):	47
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	201
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

WESTLAKE COMMUNITY HOSPITAL

1225 SUPERIOR ST
MELROSE PARK, IL 60160

Medicare Hospital Provider Number: 140240

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,620	11	9 - 14	1,737	12	10 - 15
Cancer	55	33	26 - 54	61	59	30 - 57
Cerebrovascular Accidents	66	17	17 - 37	62	21	19 - 41
Gastrointestinal Catastrophes	8	25	8 - 67	18	44	15 - 62
Infectious Disease	29	38	21 - 58	41	27	21 - 52
Metabolic/Electrolyte Disorders	46	20	12 - 42	48	15	11 - 38
Pulmonary Disease	60	30	13 - 39	68	24	14 - 37
Renal Failure	2	0	5 - 90	9	22	15 - 77
Severe Acute Heart Disease	54	46	23 - 51	62	40	27 - 53
Severe Chronic Heart Disease	106	25	14 - 32	114	25	16 - 34
Severe Trauma	4	50	3 - 82	5	40	6 - 79
Gastrointestinal Disease	107	2	1 - 9	118	4	0 - 13
Gynecologic Disease	10	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	309	3	2 - 6	308	2	2 - 6
Musculoskeletal/Skin Conditions	149	1	1 - 7	169	5	0 - 12
Neuropsychiatric/Sensory Disease	67	3	0 - 20	51	4	0 - 28
Urologic Disease	62	0	0 - 13	64	3	0 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	257
Occupancy Rate (%):	74
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	272
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	180
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WHITE HALL HOSPITAL

407 N MAIN ST
WHITE HALL, IL 62092

Medicare Hospital Provider Number: 140235

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	164	11	9 - 19	219	16	10 - 20
Cancer	2	100	2 - 88	2	100	2 - 89
Cerebrovascular Accidents	5	40	4 - 77	10	50	11 - 67
Gastrointestinal Catastrophes	0	-	-	1	0	0 - 98
Infectious Disease	3	33	2 - 86	4	25	5 - 80
Metabolic/Electrolyte Disorders	3	0	2 - 80	12	25	12 - 62
Pulmonary Disease	25	12	14 - 43	27	26	16 - 50
Renal Failure	3	67	6 - 89	1	100	2 - 97
Severe Acute Heart Disease	4	50	7 - 83	4	25	8 - 82
Severe Chronic Heart Disease	12	17	7 - 53	14	36	7 - 56
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	7	0	0 -100	27	15	0 - 65
Gynecologic Disease	3	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	13	0	0 - 78	23	0	0 - 31
Musculoskeletal/Skin Conditions	12	0	0 - 97	16	0	0 - 42
Neuropsychiatric/Sensory Disease	4	0	0 -100	3	0	0 -100
Urologic Disease	1	0	0 -100	2	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	30
Occupancy Rate (%):	30
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	5
Percent of Physicians Who Are Board Certified Specialists:	60
Interns and Residents:	0
Registered Nurses:	8
Licensed Practical Nurses:	9

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WOOD RIVER TOWNSHIP HOSPITAL

EDWARDSVILLE ROAD
WOOD RIVER, IL 62095

Medicare Hospital Provider Number: 140070

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	519	17	9 - 16	634	15	10 - 16
Cancer	9	33	16 - 73	14	43	21 - 70
Cerebrovascular Accidents	22	45	13 - 54	18	50	9 - 54
Gastrointestinal Catastrophes	4	50	8 - 84	5	40	11 - 82
Infectious Disease	3	33	3 - 86	6	33	9 - 76
Metabolic/Electrolyte Disorders	9	44	9 - 69	14	64	11 - 61
Pulmonary Disease	45	36	17 - 46	30	40	14 - 50
Renal Failure	3	0	10 - 85	3	67	5 - 88
Severe Acute Heart Disease	24	38	20 - 59	32	41	23 - 57
Severe Chronic Heart Disease	33	33	7 - 40	39	36	11 - 42
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	30	7	0 - 34	35	11	0 - 54
Gynecologic Disease	10	10	0 -100	6	0	0 -100
Low-Risk Heart Disease	52	4	1 - 17	73	3	1 - 13
Musculoskeletal/Skin Conditions	44	9	0 - 51	81	1	0 - 13
Neuropsychiatric/Sensory Disease	18	0	0 -100	11	0	0 - 99
Urologic Disease	31	6	0 - 97	23	4	0 - 44

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	155
Occupancy Rate (%):	53
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	50
Percent of Physicians Who Are Board Certified Specialists:	54
Interns and Residents:	0
Registered Nurses:	79
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

FEDERAL EXPRESS!



Wood River Township Hospital

October 25, 1988

William L. Roper, M.D., Administrator
Health Care Financing Administration
Health Standards and Quality Bureau
Hospital Mortality Information
P.O. Box 26684
Baltimore, MD 21207

Dear Sir:

By way of this letter, we are responding to the mortality data which was published for Wood River Township Hospital on September 15, 1988. There are several issues which must be addressed regarding this information.

1. Wood River Township Hospital has a very high case mix index and as such, treats patients which have severe disease states.

2. Wood River Township Hospital has an aggressive Hospice and Oncology program which treats patients in the end stages of terminal illness.

3. It is the opinion of Wood River Township Hospital that care must be taken in publishing such comparative mortality data without indication of severity of illness, differences between hospitals, patient programs provided by hospitals such as Hospice programs and aggressive Oncology units, as well as some information regarding the condition of the patient at time of discharge (i.e., Was death an inevitable occurrence given the disease that the patient had?)

In many of the cases which are used by the Health Care Financing Administration to determine the mortality data for our hospital, it was found that many of the patients had multiple conditions which could categorize them in alternate classifications. Given multiple conditions in many of these cases, many times it is difficult to identify the cause of admission as being directly correlated with the cause of death.

It is also important for the general public to understand that Medicare patients do have a different mortality rate than do the non-Medicare population. As an example, published data shows that for Illinois there is a significantly lower mortality rate for non-Medicare patients than for Medicare patients. This conclusion is not surprising but is important for the general population in evaluating the published mortality data to be aware of such differences in expected outcomes.

In summary, it must be pointed out that Wood River Township Hospital has a very high case mix index indicating a very high severity of illness of the patients seeking treatment at Wood River Township Hospital and programs which are for the benefit of the terminally ill result in differentials in the mortality rate for our hospital in the community service which we provide.

Thank you for allowing us this opportunity to respond.

Sincerely,

Jerry L. Bolandis

Jerry Bolandis
Senior Vice President

JB:psp

ADAMS CO MEMORIAL HOSP

805 HIGH STREET
DECATUR, IN 46733

Medicare Hospital Provider Number: 150106

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	380	14	11 - 19	368	12	9 - 17
Cancer	5	80	15 - 81	11	55	18 - 72
Cerebrovascular Accidents	29	24	15 - 47	26	35	15 - 51
Gastrointestinal Catastrophes	1	100	3 - 99	6	33	5 - 73
Infectious Disease	3	0	8 - 81	3	0	6 - 80
Metabolic/Electrolyte Disorders	21	19	8 - 47	3	0	0 - 88
Pulmonary Disease	34	24	17 - 47	22	14	12 - 45
Renal Failure	10	60	19 - 81	5	60	13 - 88
Severe Acute Heart Disease	6	67	16 - 81	9	11	16 - 64
Severe Chronic Heart Disease	34	29	12 - 43	35	17	9 - 36
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	27	4	0 - 46	47	4	0 - 24
Gynecologic Disease	16	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	42	2	0 - 20	37	5	1 - 27
Musculoskeletal/Skin Conditions	25	4	0 - 71	21	0	0 - 52
Neuropsychiatric/Sensory Disease	10	0	0 -100	11	0	0 -100
Urologic Disease	10	0	0 -100	13	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	87
Occupancy Rate (%):	38
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	19
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	47
Licensed Practical Nurses:	9

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

AMI CULVER UNION HOSPITAL

1710 LAFAYETT RD
CRAWFORDSVILLE, IN 47933

Medicare Hospital Provider Number: 150022

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	942	12	10 - 15	858	13	10 - 16
Cancer	19	42	21 - 64	18	44	22 - 66
Cerebrovascular Accidents	46	26	15 - 42	32	31	13 - 45
Gastrointestinal Catastrophes	5	20	6 - 75	4	0	7 - 72
Infectious Disease	24	33	23 - 62	14	29	13 - 60
Metabolic/Electrolyte Disorders	12	33	4 - 60	12	25	4 - 57
Pulmonary Disease	78	29	17 - 40	80	30	18 - 41
Renal Failure	4	100	15 - 83	7	57	18 - 88
Severe Acute Heart Disease	31	61	26 - 60	26	31	23 - 59
Severe Chronic Heart Disease	43	16	12 - 36	41	37	13 - 43
Severe Trauma	2	0	3 - 88	1	0	0 - 98
Gastrointestinal Disease	85	0	1 - 7	66	3	0 - 16
Gynecologic Disease	8	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	151	3	2 - 8	110	4	2 - 11
Musculoskeletal/Skin Conditions	63	3	0 - 26	59	3	0 - 23
Neuropsychiatric/Sensory Disease	26	0	0 - 71	19	0	0 - 65
Urologic Disease	41	0	0 - 46	44	0	0 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	84
Occupancy Rate (%):	52
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	32
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	0
Registered Nurses:	52
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

AMI Culver Union Hospital

October 17, 1988

William L. Roper, M.D.
Health Care Financing Administration
Health Standards and Quality Bureau
Hospital Mortality Information
Baltimore, MD 21207

Dear Dr. Roper:

Thank you for the opportunity to provide comment on the mortality information the Health Care Financing Administration (HCFA) will be publishing regarding AMI Culver Union Hospital. The following is to be attached to our hospital's specific report prior to public disclosure.

AMI Culver Union is a 120 bed acute care center fully accredited by the Joint Commission on Accredidation of Health Care Organizations. Our case mix includes many patients with major medical and surgical illnesses. We are a full service health care center offering specialty areas in oncology, cardiac rehabilitation and psychological counseling as well as general medicine and surgery.

The hospital and medical staff conduct an ongoing review of the medical record of each patient who expires at this facility for appropriate medical management and overall quality of care. Mortality review is an important part of our quality assurance program. Peer review activities are an integral element of monitoring the health care delivery system of AMI Culver Union.

Our hospital's specific mortality data, as reported by HCFA, for Medicare patients in 1986 has been carefully reviewed by the Administrator, Medical Staff, Director of Medical Records and Director of Community Relations. All of our actual mortality rates for the diagnostic categories are within the range of predicted mortality rates with the exceptions of Renal Failure and Severe Acute Heart Disease, according to HCFA's analysis.

AMI Culver Union's actual mortality rate of Renal Failure, according to HCFA is 100%; seventeen percent over the predicted range. Due to the minute number of cases (4), we believe the assigned rate is invalid statistically. Our facility does not have dialysis capability nor a renal specialist on staff. Serious renal patients are transferred to Methodist Hospital of Indiana.

The Medicare mortality information also lists our hospital as having a 61% actual rate in the Severe Acute Heart Disease category. This is one percent over the predicted range. While this number may be valid, it is important to note that Montgomery County continues to have a higher incidence of heart disease than the Indiana state average.

The Director of Medical Records has validated, that with minor exceptions, the data compiled by HCFA is accurate. This information indicates that a total of 52 Medicare patients admitted to AMI Culver Union Hospital expired within thirty days of admission. Of these, 40 expired while a patient in the hospital and 12 apparently died after discharge. We have no way of validating post-discharge deaths. Our records cite 1,482 Medicare admissions occurring in 1987, as compared to 942 cases reported in the HCFA data. Presumably, this discrepancy is due to the fact that HCFA includes only the last admission of patients admitted more than once during the year.

We at AMI Culver Union Hospital fully support health care consumer education. However, we emphasize that the HCFA mortality data are not, in themselves, measures of hospital performance. Under no circumstances should they be used as the basis for judging the quality of care provided by hospitals.

Sincerely,

Michael L. Collins, F.A.C.H.E.
Executive Director

S. R. Marri, M.D.
Chief of Staff

cc: Rita McBride, M.Ed., RRA

rd

BALL MEMORIAL HOSPITAL

2401 UNIVERSITY AVENUE
MUNCIE, IN 47303

Medicare Hospital Provider Number: 150089

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,147	12	10 - 13	4,026	13	10 - 14
Cancer	120	32	29 - 51	107	40	31 - 54
Cerebrovascular Accidents	141	28	18 - 34	144	29	18 - 35
Gastrointestinal Catastrophes	35	37	21 - 56	40	35	21 - 55
Infectious Disease	48	46	23 - 55	46	43	23 - 55
Metabolic/Electrolyte Disorders	86	31	13 - 39	77	30	17 - 44
Pulmonary Disease	178	28	17 - 34	178	26	15 - 32
Renal Failure	28	21	17 - 65	17	35	15 - 71
Severe Acute Heart Disease	152	36	29 - 47	182	44	29 - 46
Severe Chronic Heart Disease	211	27	16 - 30	223	24	19 - 32
Severe Trauma	4	100	4 - 71	3	33	1 - 88
Gastrointestinal Disease	345	3	2 - 6	345	2	1 - 5
Gynecologic Disease	46	2	0 - 38	45	0	0 -100
Low-Risk Heart Disease	430	1	2 - 5	417	4	2 - 6
Musculoskeletal/Skin Conditions	342	4	1 - 7	362	2	1 - 6
Neuropsychiatric/Sensory Disease	199	2	0 - 7	184	3	0 - 9
Urologic Disease	224	2	1 - 6	198	3	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	534
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	139
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	50
Registered Nurses:	404
Licensed Practical Nurses:	124

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No



October 21, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Health Standards & Quality Bureau
Hospital Mortality Information
P.O. Box 26684
Baltimore, MD 21207

Dear Dr. Roper:

This letter is in response to your plan to publish hospital specific mortality data for 1987. Although Ball Memorial Hospital's actual mortality rates fell within your range of predicted mortality rates in 15 of 16 categories, I am writing on behalf of the hospital to express our concern regarding your methodology used to determine these rates. Our concerns include the following:

1) The published mortality rates lead one to believe the cause of death is a result of illness in the diagnostic category listed, when in fact, the diagnostic category listed is the principal diagnosis, and may not be the cause of death.

2) The actual mortality rates are not statistically valid for the low volume of cases in some categories. One of our categories included only 4 cases.

3) The severity of illness of hospitals was not adequately considered when predicting mortality. In reality, referral institutions like Ball Memorial can expect to treat a large number of more severely ill patients resulting in higher mortality rates.

4) The mix of services for a hospital was not factored. Because we have an inpatient oncology program, a radiation therapy program, a hospice program, numerous intensive care units, an open heart surgery program, cardiac catheterization and angioplasty program, and other specialty services, we should expect our mortality rate to be higher than hospitals not offering similar services. These facts, however, were not considered when computing your data.

BALL MEMORIAL HOSPITAL, INC.
2401 University Ave. • Muncie, IN 47303-3499 • (317) 747-3111
Member of the Voluntary Hospitals of America System.

5) By measuring death within 30 days of admission you may be including cases totally unrelated to the hospitalization.

6) In the one diagnostic category, "Severe Trauma", which Ball Hospital fell outside your predicted mortality rate, only four (4) cases were included. According to our records this number appears to be inaccurate. We firmly believe that several more cases should have been included in this category. Also, the four cases included in your data all appear in the same ICD-9-CM code even though the "Severe Trauma" category includes more than 20 ICD-9-CM codes. Our data also shows that we have cases which should have been classified in at least five of these other codes. The conclusion that only four (4) of our over four thousand (4,000) cases were severe trauma does not seem to be statistically accurate for a referral hospital like Ball Memorial Hospital.

I sincerely believe your intent to provide information to consumers has merit. However, I think your approach for distributing and labeling this information should be revised until such time that your methodology is sophisticated enough to incorporate "severity of illness".

Cordially,

Mitchell C. Carson

Mitchell C. Carson
Vice President/Operations

/mcm

cc: Robert T. Brodhead, President and CEO, Ball Memorial Hospital
Carol McCarthy, President AHA
Ken Stella, President IHA

BARTHOLOMEW COUNTY HOSPITAL

2400 EAST 17TH STREET
COLUMBUS, IN 47201

Medicare Hospital Provider Number: 150112

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,848	11	8 - 12	1,815	12	8 - 12
Cancer	30	27	21 - 55	42	38	27 - 59
Cerebrovascular Accidents	72	25	16 - 37	74	15	17 - 35
Gastrointestinal Catastrophes	13	38	9 - 61	17	47	15 - 63
Infectious Disease	20	60	19 - 62	16	31	12 - 58
Metabolic/Electrolyte Disorders	33	27	7 - 43	33	21	10 - 44
Pulmonary Disease	87	23	16 - 37	78	24	13 - 35
Renal Failure	3	33	2 - 87	5	40	7 - 82
Severe Acute Heart Disease	62	40	25 - 51	46	59	24 - 53
Severe Chronic Heart Disease	91	21	15 - 33	110	28	14 - 32
Severe Trauma	0	-	-	2	0	0 - 92
Gastrointestinal Disease	153	5	1 - 11	151	2	1 - 8
Gynecologic Disease	26	0	0 -100	29	0	0 -100
Low-Risk Heart Disease	196	4	1 - 8	171	3	1 - 8
Musculoskeletal/Skin Conditions	272	1	0 - 5	255	2	0 - 7
Neuropsychiatric/Sensory Disease	60	3	1 - 16	75	7	0 - 44
Urologic Disease	91	2	0 - 14	80	2	0 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	211
Occupancy Rate (%):	62
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	106
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	187
Licensed Practical Nurses:	75

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BEDFORD MEDICAL CENTER

2900 WEST 16TH STREET
BEDFORD, IN 47421

Medicare Hospital Provider Number: 150124

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	798	15	11 - 17	842	17	11 - 17
Cancer	17	71	27 - 70	22	59	23 - 64
Cerebrovascular Accidents	30	33	12 - 47	35	29	17 - 47
Gastrointestinal Catastrophes	4	25	8 - 82	10	30	15 - 69
Infectious Disease	15	47	16 - 64	14	57	17 - 67
Metabolic/Electrolyte Disorders	26	15	8 - 43	16	6	6 - 42
Pulmonary Disease	59	29	18 - 43	55	29	18 - 44
Renal Failure	4	50	9 - 88	4	100	21 - 89
Severe Acute Heart Disease	40	47	26 - 57	44	48	26 - 56
Severe Chronic Heart Disease	65	12	15 - 33	62	26	15 - 38
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	61	0	1 - 9	64	8	0 - 23
Gynecologic Disease	6	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	95	4	1 - 13	121	7	1 - 14
Musculoskeletal/Skin Conditions	45	4	0 - 28	55	7	0 - 30
Neuropsychiatric/Sensory Disease	28	4	0 - 60	17	0	0 - 42
Urologic Disease	23	0	0 - 86	30	3	0 - 72

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	117
Occupancy Rate (%):	45
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	41
Percent of Physicians Who Are Board Certified Specialists:	61
Interns and Residents:	0
Registered Nurses:	62
Licensed Practical Nurses:	18

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Bedford Medical Center
HOSPITAL AND HEALTH CARE CENTER

(812) 279-3581

September 23, 1988

Mrs. Sandra Kappert
Health Standards and Quality
Bureau, HCFA
2-D-2 Meadows East Building
Meadows
6325 Security Blvd.
Baltimore, MD 21207

Dear Mrs. Kappert:

This letter is in response to published mortality statistics for Bedford Medical Center in 1987, Bedford, Indiana, Hospital Number 150124.

In your diagnostic category of cancer, we were found to have an actual mortality rate of 71%. After reviewing all 17 charts, I found a coding error in one chart and another chart that should be excluded due to the patient's expiration greater than 30 days after discharge.

(1) [redacted], age 77 years. Admission date 10-23-87/Discharge date 11-2-87. This patient expired 3-9-88 and therefore should be deleted from cancer death group due to expiring four months after discharge.

(2) [redacted] age 66. Admission date 10-7-87/Discharge and death date 10-11-87. This patient had a known diagnosis of multiple myeloma. She had a positive blood culture for E. coli at the Mayo Clinic. She was transferred back to Bedford Medical Center for ongoing medical care with continuation of her parenteral antibiotics. After reviewing this chart and applying coding rules, the cause of death and admission to the hospital was gram negative septicemia and should be the principal diagnosis, while multiple myeloma, an already known disease, should be the secondary diagnosis.

I strongly feel that these two charts don't belong in the cancer death category and therefore replace this hospital within the predicted mortality range for deaths due to cancer.

2900 W. SIXTEENTH ST. - BEDFORD, INDIANA 47421

Please keep me informed.

Sincerely,

Daniel R. Berg, M.D.
Chairman
Utilization Review Committee

DRB/kat

BLACKFORD COUNTY HOSPITAL

503 EAST VAN CLEVE STREET
HARTFORD CITY, IN 47348

Medicare Hospital Provider Number: 150114

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	296	18	10 - 19	296	12	9 - 17
Cancer	4	100	9 - 73	4	75	11 - 84
Cerebrovascular Accidents	10	60	6 - 63	14	36	12 - 60
Gastrointestinal Catastrophes	2	50	3 - 92	1	100	1 - 97
Infectious Disease	2	0	5 - 89	2	50	5 - 94
Metabolic/Electrolyte Disorders	12	0	10 - 44	4	0	5 - 71
Pulmonary Disease	25	16	15 - 46	29	21	11 - 43
Renal Failure	3	100	10 - 85	0	-	-
Severe Acute Heart Disease	16	69	19 - 63	15	27	18 - 62
Severe Chronic Heart Disease	14	36	5 - 55	16	19	8 - 48
Severe Trauma	1	0	2 - 97	0	-	-
Gastrointestinal Disease	31	10	0 - 63	28	0	0 - 24
Gynecologic Disease	2	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	28	11	0 - 44	35	3	1 - 24
Musculoskeletal/Skin Conditions	15	0	0 - 58	19	11	0 - 75
Neuropsychiatric/Sensory Disease	4	25	0 -100	4	0	0 -100
Urologic Disease	10	0	0 - 99	8	0	0 - 91

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	47
Occupancy Rate (%):	34
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	11
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	14
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BLOOMINGTON HOSP

P O BOX 1149
BLOOMINGTON, IN 47401

Medicare Hospital Provider Number: 150051

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,366	11	9 - 13	2,259	13	11 - 15
Cancer	88	51	31 - 55	134	46	33 - 55
Cerebrovascular Accidents	86	30	18 - 39	84	31	19 - 40
Gastrointestinal Catastrophes	16	31	13 - 59	18	33	17 - 61
Infectious Disease	17	35	17 - 63	28	39	16 - 54
Metabolic/Electrolyte Disorders	45	16	19 - 47	27	15	9 - 42
Pulmonary Disease	95	23	17 - 36	99	29	15 - 36
Renal Failure	8	38	9 - 76	11	27	16 - 76
Severe Acute Heart Disease	88	30	26 - 48	98	42	27 - 49
Severe Chronic Heart Disease	132	23	15 - 31	119	18	16 - 31
Severe Trauma	3	100	10 - 83	1	100	1 - 97
Gastrointestinal Disease	230	3	1 - 7	195	3	1 - 7
Gynecologic Disease	27	0	0 - 42	44	0	0 -100
Low-Risk Heart Disease	248	2	2 - 6	192	4	1 - 8
Musculoskeletal/Skin Conditions	175	2	1 - 7	155	6	1 - 12
Neuropsychiatric/Sensory Disease	78	1	0 - 13	59	3	0 - 28
Urologic Disease	142	3	0 - 13	129	3	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	347
Occupancy Rate (%):	53
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	144
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	202
Licensed Practical Nurses:	100

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Bloomington Hospital . P.O. 1149 . Bloomington, Indiana 47402 . 812-336-6821

MEDICARE PROVIDER NO. 150051

Oct. 20, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

Thank you for the opportunity to respond to the release of data on hospital mortality rates for Jan. 1, 1987, through Dec. 31, 1987. Since receiving the report Sept. 19, I and several other members of the Bloomington Hospital staff have had the opportunity to review the data.

We would like to request the following information be included with our data. We feel it supplements any interpretion of our statistics.

Bloomington Hospital is a not-for-profit 347-bed regional referral center which serves South Central Indiana. The hospital's case mix includes many patients with major medical and surgical illnesses. We are a full service medical center providing care in specialty areas, including oncology, cardiology, orthopedic services, dialysis, rehabilitative medicine and general medicine and surgery.

Because the hospital serves as a regional referral center for severely or acutely ill patients and because it provides care to the terminally ill, it attracts patients with a higher than average expected mortality. Still, Bloomington Hospital fell within the range for predicted mortality in nearly every category.

We would like to address HCFA Mortality data in three diagnostic categories: cancer, renal failure and severe trauma.

While the hospital falls within the range of predicted mortality for cancer and renal failure, it should be noted that we offer specialized services in these two areas. Bloomington Hospital serves as a cancer diagnostic and treatment center, drawing 50 percent of its patients from outside the county. Hospice care also is provided. Our Dialysis Center provides end-stage renal dialysis, continuous ambulatory peritoneal dialysis and home hemodialysis.

In the severe trauma diagnostic category, it should be noted that this represents only three deaths in a one-year period.

Two of the patients were admitted with a diagnosis of lung aspiration; one was an 82-year-old with lung cancer and the other was a 76-year-old with respiratory failure, anemia and various other acute diagnoses.

The third patient was an 89-year-old who was admitted with a subarachnoid hemorrhage.

It should also be noted that because the patients were either under treatment for a chronic condition or had sustained massive trauma, death was a significant possibility.

Our medical staff, as has been their practice, will continue to review mortality cases for quality and appropriateness of care. Mortality review is an ongoing process of the quality assessment program and peer review activities are an integral part of the monitoring of the healthcare delivery system at Bloomington Hospital.

Consumers of health care, both patients and third party payors, have a legitimate interest in data concerning quality but mortality statistics alone are not useful for drawing conclusions about quality. They do not factor in how sick the patient was upon admission nor do they speak to the cause of death. They include deaths outside the hospital setting, including accidental death. And, they deal with the frailest segment of the hospital's total patient population.

HCFA's information is a statistical analysis to identify potential areas for further evaluation. It cannot be used directly as a measure of hospital performance. The statistical correlations state nothing about cause and effect. The rates only state relationships between Medicare admissions and death. Only a review of each medical record can determine what role, if any, hospital care played in the clinical outcome.

An appropriate assessment of hospital performance is dependent on many variables and requires a look at many quality indicators of which mortality is but one.

Thank you for the opportunity to present this response.

Sincerely,

Roland E. Kohr

Roland E. Kohr
President

CAMERON MEMORIAL COMMUNITY HOSP INC

416 EAST AND 909 WEST MAUMEE S
ANGOLA, IN 46703

Medicare Hospital Provider Number: 150039

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	401	14	7 - 15	359	13	7 - 15
Cancer	4	100	13 - 76	4	25	5 - 80
Cerebrovascular Accidents	9	11	7 - 56	3	67	2 - 87
Gastrointestinal Catastrophes	3	100	6 - 80	5	0	3 - 65
Infectious Disease	12	33	11 - 63	6	33	8 - 75
Metabolic/Electrolyte Disorders	7	14	5 - 64	7	29	9 - 72
Pulmonary Disease	28	21	7 - 41	27	26	9 - 44
Renal Failure	1	100	1 - 97	1	0	3 - 98
Severe Acute Heart Disease	15	47	15 - 63	16	50	18 - 64
Severe Chronic Heart Disease	30	37	9 - 44	26	31	7 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	42	0	0 - 16	45	4	0 - 62
Gynecologic Disease	5	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	48	0	0 - 12	37	5	0 - 50
Musculoskeletal/Skin Conditions	20	10	0 - 99	22	0	0 - 89
Neuropsychiatric/Sensory Disease	9	11	0 -100	7	0	0 -100
Urologic Disease	16	13	0 -100	15	0	0 - 56

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	61
Occupancy Rate (%):	51
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	15
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	0
Registered Nurses:	29
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CAYLOR-NICKEL HOSP INC

ONE CAYLOR-NICKEL SQUARE
BLUFFTON, IN 46714

Medicare Hospital Provider Number: 150075

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,123	10	8 - 13	1,059	9	8 - 13
Cancer	28	46	23 - 61	35	46	27 - 61
Cerebrovascular Accidents	40	32	13 - 43	33	18	16 - 44
Gastrointestinal Catastrophes	7	43	6 - 72	9	22	9 - 64
Infectious Disease	20	30	16 - 57	15	47	13 - 62
Metabolic/Electrolyte Disorders	22	23	14 - 52	21	10	8 - 41
Pulmonary Disease	71	30	16 - 40	58	21	15 - 38
Renal Failure	3	33	3 - 87	5	60	17 - 92
Severe Acute Heart Disease	25	28	22 - 58	25	40	28 - 65
Severe Chronic Heart Disease	67	15	12 - 31	54	13	13 - 33
Severe Trauma	4	25	4 - 80	0	-	-
Gastrointestinal Disease	91	0	1 - 7	97	4	0 - 15
Gynecologic Disease	18	0	0 -100	23	0	0 -100
Low-Risk Heart Disease	121	2	1 - 9	103	3	1 - 10
Musculoskeletal/Skin Conditions	157	1	1 - 6	151	0	0 - 5
Neuropsychiatric/Sensory Disease	30	0	0 - 46	40	2	0 - 55
Urologic Disease	39	3	0 - 29	41	0	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	188
Occupancy Rate (%):	43
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	46
Percent of Physicians Who Are Board Certified Specialists:	87
Interns and Residents:	0
Registered Nurses:	62
Licensed Practical Nurses:	26

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Caylor-Nickel
Medical Center

Hospital
Incorporated

One Caylor-Nickel Square
Bluffton, Indiana 46714

October 17, 1988

William L. Roper, M.D.
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

The following information for Caylor-Nickel Hospital is to be attached to HCFA's Mortality Release concerning 1986/1987 Medicare patients.

Caylor-Nickel Hospital is a 200 bed Rural Referral Center. The Hospital is a part of the Caylor-Nickel Medical Center which includes a Research Center and a multi-specialty group practice with full-time staffing of over 45 specialists representing over 30 specialties and sub-specialties. We offer sophisticated diagnostic capabilities including MRI and CAT Scan services.

Medicare recognizes Caylor-Nickel as a Rural Referral Center because of the severity of illness of our Medicare cases. According to the latest information we have received concerning Rural Referral Center statistics, Caylor-Nickel Hospital has the second highest case mix index (measurement of severity of patient illness) of Rural Referral Centers in the state of Indiana.

Our 1986/1987 Medicare mortality data as reported by HCFA was reviewed by the President of the Medical Staff, Physician Chairman of the Utilization Review Committee, Physician Chairman of the Quality Assessment Committee, Director of Utilization Review and Quality Assurance, and the Director of Medical Records. We are pleased to note that all our mortality rates were lower than or within predicted ranges despite the severity of illness treated at Caylor-Nickel.

Quality of care is of utmost importance to Caylor-Nickel Hospital. Our Medical Staff and multi-disciplinary teams conduct intensive review of the medical record of every patient in the hospital regarding medical management and overall care. Mortality Review is only one of our many Quality Assurance components and is an ongoing process of the Quality Assurance Program. Peer Review activities such as mortality review are an integral part of the monitoring of the health care delivery system at this hospital. The Joint Commission on Accreditation of Hospitals recognizes our Quality Assurance and Peer Review process as meeting their standards for quality care.

Thank you for this opportunity to respond.

Sincerely,

Anita Morton, M.D.
President of Medical Staff
ALM:ksb

CLARK COUNTY MEMORIAL HOSPITAL

1220 MISSOURI AVENUE
JEFFERSONVILLE, IN 47130

Medicare Hospital Provider Number: 150009

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,636	15	11 - 16	1,519	15	11 - 16
Cancer	56	41	28 - 57	40	52	32 - 64
Cerebrovascular Accidents	61	33	17 - 41	47	40	17 - 45
Gastrointestinal Catastrophes	18	33	12 - 57	19	58	16 - 61
Infectious Disease	20	45	14 - 58	8	50	12 - 74
Metabolic/Electrolyte Disorders	36	17	12 - 42	23	22	11 - 49
Pulmonary Disease	181	31	18 - 35	148	31	19 - 38
Renal Failure	14	64	19 - 76	17	65	20 - 77
Severe Acute Heart Disease	65	43	27 - 52	53	43	27 - 54
Severe Chronic Heart Disease	86	28	14 - 34	90	29	17 - 37
Severe Trauma	6	67	6 - 74	4	50	2 - 83
Gastrointestinal Disease	113	4	1 - 11	112	3	1 - 10
Gynecologic Disease	12	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	176	3	1 - 8	181	2	2 - 7
Musculoskeletal/Skin Conditions	137	1	1 - 6	131	5	0 - 12
Neuropsychiatric/Sensory Disease	38	0	0 - 20	39	0	0 - 41
Urologic Disease	58	0	0 - 10	61	3	0 - 35

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	204
Occupancy Rate (%):	53
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	101
Percent of Physicians Who Are Board Certified Specialists:	54
Interns and Residents:	0
Registered Nurses:	151
Licensed Practical Nurses:	48

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Clark County
Memorial Hospital

Merle E. Stepp
Executive Director

October 14, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, MD 21207

Attention: Sandra Kappert

Dear Ms. Kappert:

Re: Medicare Provider No. 150009

Thank you for the opportunity to comment on the mortality findings report. Again this year I would like to point out that numerous factors may affect the statistics and must be taken into consideration.

First, the mortality statistics are based on patients who died within 30 days after hospital admission and thus includes those patients who may have left the hospital in satisfactory condition and later died from totally unrelated causes, be they illness or accident.

I feel that basing the mortality statistics on patients who die within 30 days after hospital admission is really only applicable in cases of premature discharge. This situation has not been a factor at our hospital as can be seen through review of our records.

Second, because of our hospital's location adjacent to a large metropolitan area and our ability to offer more extensive testing and treatment than many surrounding rural hospitals, many patients are admitted as transfers from rural areas who have been sent here because of the serious nature of their illness or injury and who thus might reasonably be expected to have a greater mortality rate.

We bring to your attention an error on the reported number of beds. The report indicates 164 which should be 232 per the AHA 1986 report.

Again, I appreciate the opportunity to point out the fact that these and other conditions could significantly alter the statistics in your mortality report.

Sincerely,

Merle E. Stepp

Merle E. Stepp
Executive Director

CLAY COUNTY HOSPITAL

1206 EAST NATIONAL AVENUE
BRAZIL, IN 47834

Medicare Hospital Provider Number: 150050

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	586	14	10 - 16	591	17	11 - 18
Cancer	16	69	24 - 69	19	63	22 - 65
Cerebrovascular Accidents	38	29	14 - 43	29	41	11 - 47
Gastrointestinal Catastrophes	0	-	-	6	83	10 - 72
Infectious Disease	7	14	7 - 65	9	22	17 - 71
Metabolic/Electrolyte Disorders	7	14	2 - 66	9	0	8 - 49
Pulmonary Disease	56	30	15 - 41	53	25	18 - 43
Renal Failure	3	33	3 - 87	9	67	19 - 84
Severe Acute Heart Disease	30	33	26 - 60	30	47	21 - 56
Severe Chronic Heart Disease	26	27	9 - 44	35	26	11 - 41
Severe Trauma	0	-	-	1	100	0 - 99
Gastrointestinal Disease	71	3	1 - 14	43	5	0 - 30
Gynecologic Disease	4	0	0 -100	8	13	0 -100
Low-Risk Heart Disease	66	5	0 - 18	64	3	1 - 15
Musculoskeletal/Skin Conditions	33	0	0 - 22	33	3	0 - 51
Neuropsychiatric/Sensory Disease	3	0	0 -100	9	0	0 - 98
Urologic Disease	27	7	0 - 82	31	10	0 - 86

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	78
Occupancy Rate (%):	31
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No



Phone (812) 448-2675

CLAY COUNTY HOSPITAL

1206 EAST NATIONAL AVENUE BRAZIL, INDIANA 47834

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

After reviewing the Medicare Hospital Mortality Report for the Clay County Hospital in Brazil, Indiana I find that our statistics fell well within the range of predicted mortality for all the categories in the study.

We are very proud of our strong ongoing Quality Assurance Program at this Hospital and I am convinced this has contributed to our success.

Clay County Hospital is a small county hospital, dedicated to meet the needs of our community.

Sincerely,

Richard Denney
Administrator

RD;mjj

CLINTON CO HOSP

1300 S JACKSON ST
FRANKFORT, IN 46041

Medicare Hospital Provider Number: 150043

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	537	15	11 - 18	530	15	12 - 19
Cancer	7	86	15 - 71	7	29	17 - 79
Cerebrovascular Accidents	36	17	14 - 40	35	26	15 - 45
Gastrointestinal Catastrophes	4	50	7 - 83	3	33	2 - 87
Infectious Disease	20	20	20 - 58	18	22	19 - 60
Metabolic/Electrolyte Disorders	16	31	9 - 56	12	50	12 - 65
Pulmonary Disease	58	31	15 - 41	53	19	14 - 38
Renal Failure	1	100	0 - 99	3	67	12 - 95
Severe Acute Heart Disease	16	50	14 - 60	30	47	24 - 59
Severe Chronic Heart Disease	44	14	14 - 36	45	33	15 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	26	0	1 - 20	37	0	1 - 15
Gynecologic Disease	8	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	56	5	1 - 21	55	4	2 - 16
Musculoskeletal/Skin Conditions	41	2	0 - 27	39	8	0 - 42
Neuropsychiatric/Sensory Disease	16	0	0 - 91	8	13	0 -100
Urologic Disease	14	0	0 - 98	23	0	0 - 48

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	88
Ownership/Control:	Local Government

STAFFING

Interns and Residents:	0
Registered Nurses:	54
Licensed Practical Nurses:	16

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Clinton County Hospital

October 21, 1988

William L. Roper, M.D., Administrator
Health Standards and Quality Bureau, HCFA
2-d-2-Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mr. Roper,

These comments are written to express the opinion of Clinton County Hospital regarding the HCFA mortality rates of 1987 and 1986. We would first of all like to express our support for the public release of information, concerning health care institutions, that truly reflects quality of care.

As your release will include both years of 1986 and 1987, we will briefly address both years with the folowing comments.

The results of the 1986 release indicatethat all 16 diagnostic categories were within the predicted range of mortality. For 1987, two (2) categories fell outside the predicted ranges for mortality. There were a total of seven (7) Cancer cases in which six (6) cases expired within thirty (30) days of admission for a range of eighty-six (86) percent. The predicted range is fifteen (15) to seventy-one (71) percent. Three (3) of the six (6) cases expired outside of the hospital. The average age of the patients was seventy-four (74) years of age. All cases are individually reviewed and showed that those in which the patients expired in the hospital were not unexpected deaths.

Renal Failure was the second category in which there was only one (1) case reported therefore resulting in one hundred (100) percent mortality. This result surely does not demonstrate an accurate measure of quality. The patient expired in a nursing home.

The Clinton County Hospital Medical Staff reviews each and every death that occurs in the hospital. The internal review mechanisms in place also reviews infection rates, quality assurance concerns, appropriateness of admissions and treatment, indications for specific procedures and measurements of outcomes that are pre-established by the Medical Staff.

continued on page 2

Clinton County Hospital

In a transmittal letter by he Administrator of HCFA, William Roper, M.D., he states concerning the release of mortality information that "the information by itself is not a complete measure of the quality of care at an individual hospital. While we believe that information on hospital mortality rates is useful, until we have developed additional statistical measures to deal with complex issues such as severity of illness, we cannot and do not recommend the use of the information by itself to make judgments about the quality of care in an individual hospital or to make comparisons among hospitals. Individual hospitals may have very good reasons for their rates being higher than the ranges predicted by HCFA's model."

With our constant and current review mechanisms in place, we attempt to assure our community and our patients the highest quality of care possible.

We trust that these comments will be helpful so that such data disclosure does not provoke unnessary apprehension.

Sincerely,

Brian R. Zeh
Executive Director

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COMM HOSP ASSN INC

412 N MONROE ST
WILLIAMSPORT, IN 47993

Medicare Hospital Provider Number: 150103

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	212	18	8 - 19	191	13	9 - 19
Cancer	1	100	3 - 98	3	67	4 - 86
Cerebrovascular Accidents	4	0	9 - 73	11	27	9 - 60
Gastrointestinal Catastrophes	5	40	5 - 78	1	0	0 - 98
Infectious Disease	1	100	3 - 99	2	0	4 - 88
Metabolic/Electrolyte Disorders	6	67	13 - 79	4	25	5 - 80
Pulmonary Disease	21	33	9 - 50	19	16	9 - 45
Renal Failure	1	0	1 - 97	0	-	-
Severe Acute Heart Disease	6	67	13 - 79	4	75	18 - 91
Severe Chronic Heart Disease	20	30	9 - 49	17	18	7 - 46
Severe Trauma	0	-	-	1	0	1 - 97
Gastrointestinal Disease	24	8	0 - 56	17	6	0 - 94
Gynecologic Disease	0	-	-	1	0	0 -100
Low-Risk Heart Disease	23	4	0 - 54	21	5	0 - 53
Musculoskeletal/Skin Conditions	13	8	0 - 62	14	0	0 - 81
Neuropsychiatric/Sensory Disease	5	0	0 -100	5	0	0 - 99
Urologic Disease	18	0	0 -100	5	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	35
Occupancy Rate (%):	26
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COMM HOSP OF ANDERSON

1515 N MADISON AV
ANDERSON, IN 46012

Medicare Hospital Provider Number: 150113

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,267	12	9 - 14	1,336	13	9 - 14
Cancer	33	48	25 - 60	27	52	26 - 64
Cerebrovascular Accidents	50	12	16 - 36	49	29	17 - 43
Gastrointestinal Catastrophes	13	31	17 - 67	9	0	16 - 55
Infectious Disease	15	40	17 - 65	22	50	18 - 61
Metabolic/Electrolyte Disorders	28	43	11 - 51	26	35	13 - 52
Pulmonary Disease	79	29	16 - 38	74	27	15 - 38
Renal Failure	3	67	8 - 91	6	17	14 - 81
Severe Acute Heart Disease	32	50	24 - 59	33	48	23 - 57
Severe Chronic Heart Disease	76	24	13 - 33	68	31	13 - 37
Severe Trauma	1	0	1 - 97	0	-	-
Gastrointestinal Disease	111	5	1 - 13	110	5	1 - 13
Gynecologic Disease	19	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	132	3	1 - 9	150	5	1 - 10
Musculoskeletal/Skin Conditions	111	3	1 - 10	122	2	1 - 9
Neuropsychiatric/Sensory Disease	47	6	0 - 74	88	1	0 - 11
Urologic Disease	79	4	0 - 29	64	3	0 - 24

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	207
Occupancy Rate (%):	48
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	82
Percent of Physicians Who Are Board Certified Specialists:	54
Interns and Residents:	0
Registered Nurses:	117
Licensed Practical Nurses:	32

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COMM HOSP OF INDIANA INC

1500 RITTER AVE
INDIANAPOLIS, IN 46219

Medicare Hospital Provider Number: 150074

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	5,253	13	10 - 13	5,196	13	9 - 13
Cancer	205	52	33 - 53	194	48	31 - 51
Cerebrovascular Accidents	220	27	19 - 33	223	27	21 - 35
Gastrointestinal Catastrophes	52	37	19 - 50	40	30	21 - 55
Infectious Disease	49	39	24 - 54	41	46	22 - 56
Metabolic/Electrolyte Disorders	78	27	16 - 42	69	28	11 - 38
Pulmonary Disease	257	29	19 - 34	251	27	18 - 34
Renal Failure	27	37	17 - 68	12	58	12 - 74
Severe Acute Heart Disease	176	37	28 - 45	215	36	30 - 46
Severe Chronic Heart Disease	220	23	16 - 29	217	27	17 - 31
Severe Trauma	8	13	5 - 61	5	40	3 - 78
Gastrointestinal Disease	385	3	2 - 6	392	3	1 - 6
Gynecologic Disease	45	2	0 - 89	31	0	0 - 77
Low-Risk Heart Disease	536	4	2 - 6	523	5	2 - 6
Musculoskeletal/Skin Conditions	594	3	1 - 5	610	2	1 - 5
Neuropsychiatric/Sensory Disease	453	2	1 - 5	439	2	1 - 5
Urologic Disease	152	3	0 - 11	147	3	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	519
Occupancy Rate (%):	72
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	274
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	18
Registered Nurses:	488
Licensed Practical Nurses:	99

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No



Community Hospitals Indianapolis

Hospital ID: 150074

Community Hospital Indianapolis

1500 North Ritter Avenue
Indianapolis, Indiana 46219
Telephone (317) 353-1411

Community Hospitals Indianapolis has as its primary goal, the provision of high quality medical care. Because of our commitment and concern, we have reviewed the Health Care Financing Administration's (HCFA) Medicare Hospital Mortality Information (1987) data and found that we are within the normal ranges for all of the 16 diagnostic categories.

Discrepancies are identified in the Hospital Characteristics portion of the data, apparently because AHA data was only for one of our hospitals, Community Indianapolis, and did not include data for Community Hospital North, our second facility. Please note that both facilities have the same Medicare provider number. Because this discrepancy could effect mortality rate calculation, we submit the following information which reflects Hospital Characteristics data for both facilities.

1986		1987	
Beds (#):	740	Beds (#):	719
Occupancy Rate (%):	76	Occupancy Rate (%):	72
		Total # Physicians:	274
all other 1986 data correct		% Physicians who are Board Certified Specialists:	69%
		Interns/Residents per Bed:	0.03
		Registered Nurses per Bed:	1.17
		Lic. Pract. Nurses per Bed:	0.24
		Specialty Services:	same as 1986

Community Hospitals Indianapolis supports HCFA's efforts to develop additional statistical measures to deal with complex issues related to hospital mortality and their commitment to assist hospitals in interpreting mortality rates of their patients.

Patient mortality is reviewed on an ongoing basis at Community Hospitals as part of the hospitals' Medical Staff Quality Assurance Program. If concerns are identified during this process, corrective actions are taken.

Community Hospitals Indianapolis stresses that it is of utmost importance that the public understand that there are numerous conditions and circumstances which contribute to patient mortality which are in no way related to poor quality care and that mortality rates are but one of many outcome indicators which hospitals use to analyze quality.

COMMUNITY HOSPITAL OF BREMEN INC

411 SOUTH WHITLOCK STREET
BREMEN, IN 46506

Medicare Hospital Provider Number: 150110

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	149	15	9 - 21	130	10	11 - 22
Cancer	1	0	2 -100	1	100	3 -100
Cerebrovascular Accidents	12	33	11 - 61	6	17	6 - 68
Gastrointestinal Catastrophes	1	100	1 - 97	1	0	0 -100
Infectious Disease	3	100	14 - 87	1	100	1 - 97
Metabolic/Electrolyte Disorders	4	25	9 - 83	3	0	8 - 81
Pulmonary Disease	9	11	6 - 56	10	30	14 - 67
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	8	50	15 - 75	7	14	22 - 77
Severe Chronic Heart Disease	10	30	4 - 61	14	21	6 - 52
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	13	0	0 - 97	8	0	0 - 98
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	26	4	0 - 47	21	0	1 - 28
Musculoskeletal/Skin Conditions	7	0	0 -100	3	0	0 -100
Neuropsychiatric/Sensory Disease	4	25	0 -100	4	0	0 -100
Urologic Disease	3	0	0 -100	4	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	28
Occupancy Rate (%):	36
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	7
Percent of Physicians Who Are Board Certified Specialists:	86
Interns and Residents:	0
Registered Nurses:	7
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Community
Hospital of Bremen
"Our family caring for yours"

September 30, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-0-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

After a complete and thorough review of the Health Care Financing Administration Medicare Hospital Mortality Information for 1987, we feel that it is correct to the best of our knowledge.

I maintain the position that release of mortality data by Medicare is misleading to the American public. Other circumstances causing death must also be taken into account, such as severity of illness, types of services, intensity of services, as well as any other special combinations which may exist. These are not included in the data released to the public.

I would recommend that Medicare review its policy on release of date. At this point, I feel it is more destructive, than constructive.

Sincerely,

Jerome J. Bozek
Administrator

JJB/gar

DAVIESS COUNTY HOSPITAL

1314 GRAND AVE
WASHINGTON, IN 47501

Medicare Hospital Provider Number: 150061

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	717	13	10 - 16	772	18	10 - 17
Cancer	12	58	20 - 72	15	73	22 - 67
Cerebrovascular Accidents	45	29	17 - 45	55	44	17 - 44
Gastrointestinal Catastrophes	5	0	9 - 67	4	25	6 - 81
Infectious Disease	8	38	9 - 70	16	31	13 - 59
Metabolic/Electrolyte Disorders	29	24	13 - 48	18	28	5 - 51
Pulmonary Disease	60	12	14 - 34	60	23	11 - 36
Renal Failure	5	60	12 - 86	4	100	12 - 80
Severe Acute Heart Disease	25	40	21 - 59	36	53	25 - 58
Severe Chronic Heart Disease	45	24	11 - 37	56	23	14 - 38
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	66	2	0 - 14	55	4	0 - 20
Gynecologic Disease	10	0	0 -100	10	10	0 -100
Low-Risk Heart Disease	89	2	1 - 10	113	5	1 - 12
Musculoskeletal/Skin Conditions	48	2	1 - 16	56	5	0 - 35
Neuropsychiatric/Sensory Disease	12	0	0 -100	14	7	0 - 99
Urologic Disease	26	0	0 - 87	15	0	0 - 97

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	160
Occupancy Rate (%):	(not available)
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

DEACONESS HOSPITAL INC

600 MARY STREET
EVANSVILLE, IN 47710

Medicare Hospital Provider Number: 150082

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,879	12	10 - 14	4,044	12	9 - 13
Cancer	130	41	28 - 50	146	39	30 - 51
Cerebrovascular Accidents	140	29	18 - 35	150	31	20 - 36
Gastrointestinal Catastrophes	23	57	18 - 60	27	33	14 - 53
Infectious Disease	85	34	23 - 48	65	23	24 - 50
Metabolic/Electrolyte Disorders	115	18	12 - 35	76	21	11 - 36
Pulmonary Disease	173	24	18 - 34	195	22	16 - 32
Renal Failure	16	50	18 - 75	15	53	21 - 80
Severe Acute Heart Disease	154	44	28 - 47	154	44	30 - 48
Severe Chronic Heart Disease	184	24	15 - 30	191	28	16 - 30
Severe Trauma	18	56	10 - 58	13	46	7 - 62
Gastrointestinal Disease	237	3	1 - 7	296	3	1 - 7
Gynecologic Disease	20	0	0 -100	25	0	0 -100
Low-Risk Heart Disease	563	4	2 - 6	550	4	2 - 6
Musculoskeletal/Skin Conditions	395	3	1 - 6	415	2	1 - 5
Neuropsychiatric/Sensory Disease	185	2	0 - 7	208	3	1 - 8
Urologic Disease	145	2	0 - 14	132	3	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	596
Occupancy Rate (%):	50
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	164
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	11
Registered Nurses:	478
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

DEACONESS HOSPITAL

October 20, 1988

Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

15-0082

Dear Sir:

Thank you for the opportunity to review and comment on the 1987 Medicare mortality information. We are pleased to see that HSQB has attempted to enhance and qualify the mortality information by revamping the diagnostic categories to accommodate the concern of grouping patients with significantly different risks of death; the offering of a Medicare Mortality Predictor System (MMPS) as a tool to estimate the likelihood of death within four (4) categories of patients.

A verification of the 1987 mortality data indicates a reported 3,879 total admissions with a 12% mortality rate. In actuality, the hospital had 6,133 Medicare admissions for the year. The difference in the admissions is your methodology to count only the last admission and exclude patients with stays greater than thirty (30) days. We cannot verify the accuracy of those patients that may have been excluded without exhaustive manual research. We would suggest that in future reports all admissions are identified for a hospital so that verification and accounting can be undertaken.

Of the 484 reported deaths, we find 126 deaths to have occurred after discharge. We cannot verify the accuracy of your data regarding the post discharge deaths since we do not have access to Social Security data and chose not to contact family members for verification.

With the exception of a few cases, we find the accuracy of the data within the 16 diagnostic categories to be correct.

Although Deaconess Hospital is within range for predicted mortality in all categories, three categories reflect percentages approaching the upper limit. An individual case review of these categories verifies proper clinical management and points out contributing factors that must be considered: age, severity, history, pre-existing condition and geographic locale. The Evansville hospitals serve as referral centers encompassing an approximate 100-mile radius. Acutely ill patients are referred from other health care providers for the specific services and expertise available.

The 1986 Hospital Characteristics portion of your data is erroneous. Since the 1987 Hospital Characteristics will not be shared with us prior to release, we cannot comment on its accuracy.

Despite the complexity and apparent sophistication of the methods used to generate the mortality data, it's important to keep in mind that mortality rates are nothing more than averages. This type of information cannot say why rates differ or whether differences are good, bad, or indifferent.

We recognize and support the release of useful and reliable information but must also stress that mortality rates, by themselves, do not measure quality. Quality can only be evaluated through the process of peer review in conjunction with meaningful statistical comparisons.

Mortality review has long been a part of the quality review process conducted by Deaconess Hospital. Medical staff departments review all mortality cases to distinguish those that were anticipated from those that were unexpected. In doing so, the medical staff evaluates a series of critical questions to examine all aspects of the appropriateness of the care provided.

Thank you for the opportunity to respond.

Sincerely,

Thomas H. Kramer

Thomas H. Kramer
President

/rh

DEARBORN COUNTY HOSPITAL

600 WILSON CREEK RD
LAWRENCEBURG, IN 47025

Medicare Hospital Provider Number: 150086

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,119	14	12 - 17	1,066	15	11 - 17
Cancer	35	63	34 - 67	35	46	23 - 57
Cerebrovascular Accidents	58	26	16 - 40	43	21	16 - 42
Gastrointestinal Catastrophes	5	40	7 - 79	9	33	11 - 69
Infectious Disease	20	25	13 - 54	15	20	17 - 60
Metabolic/Electrolyte Disorders	14	36	9 - 59	22	14	10 - 45
Pulmonary Disease	123	30	17 - 36	96	31	18 - 39
Renal Failure	9	56	16 - 80	5	20	16 - 87
Severe Acute Heart Disease	45	44	28 - 57	52	40	29 - 57
Severe Chronic Heart Disease	58	14	15 - 35	68	31	15 - 38
Severe Trauma	2	0	0 - 93	1	0	1 - 97
Gastrointestinal Disease	110	3	1 - 10	98	3	0 - 13
Gynecologic Disease	14	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	118	3	1 - 9	133	2	1 - 8
Musculoskeletal/Skin Conditions	89	2	1 - 11	82	4	1 - 13
Neuropsychiatric/Sensory Disease	27	7	0 - 76	25	0	0 - 72
Urologic Disease	42	5	0 - 33	39	10	0 - 66

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	131
Occupancy Rate (%):	47
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	35
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	0
Registered Nurses:	77
Licensed Practical Nurses:	29

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

DECATUR COUNTY MEMORIAL HOSPITAL

720 NORTH LINCOLN STREET
GREENSBURG, IN 47240

Medicare Hospital Provider Number: 150062

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	510	15	12 - 19	498	16	10 - 18
Cancer	10	50	15 - 71	7	29	10 - 72
Cerebrovascular Accidents	19	32	14 - 55	35	29	13 - 44
Gastrointestinal Catastrophes	2	0	7 - 90	1	0	0 - 99
Infectious Disease	9	22	19 - 73	7	29	11 - 73
Metabolic/Electrolyte Disorders	23	22	10 - 48	15	33	11 - 59
Pulmonary Disease	45	31	16 - 45	45	47	13 - 44
Renal Failure	2	50	3 - 93	2	100	11 - 97
Severe Acute Heart Disease	35	54	25 - 59	18	44	19 - 63
Severe Chronic Heart Disease	43	19	14 - 39	54	30	11 - 37
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	32	3	0 - 38	50	4	0 - 22
Gynecologic Disease	4	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	54	6	0 - 22	61	5	1 - 18
Musculoskeletal/Skin Conditions	31	0	0 - 20	27	0	0 - 53
Neuropsychiatric/Sensory Disease	12	0	0 -100	7	0	0 -100
Urologic Disease	22	0	0 - 79	20	0	0 - 51

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	115
Occupancy Rate (%):	23
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	16
Percent of Physicians Who Are Board Certified Specialists:	56
Interns and Residents:	0
Registered Nurses:	43
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Decatur County Memorial Hospital
The care you want. Close by.

David V. Trexler
Executive Director

Telephone
(812) 663-4331

October 18, 1988

Dr. William L. Roper, M.D.
Administrator
Health Care Financing Administration
Health Standards and Quality Bureau
Hospital Mortality Information
P. O. Box 26684
Baltimore, Maryland 21207

Dear Dr. Roper:

The following information for Decatur County Memorial Hospital is to be attached to the specific report of the Hospital's mortality statistics for 1987 prior to publication in December, 1988.

Decatur County Memorial Hospital is a 115 bed, acute care, general medical facility. The Hospital provides the community with a wide range of medical services including emergency care, acute and long term inpatient care, outpatient diagnostic services, home health care, maternity care and gynecology services, and general medical and surgical care.

The medical staff at Memorial conducts an intensive review of the medical record of each patient who expires at the Hospital, to monitor medical management and overall care. Mortality review is an ongoing process of the quality assurance program at Memorial.

Decatur County Memorial Hospital's specific mortality statistics have been reviewed by: the Hospital Executive Director, Chief of Staff, Director of Emergency Medicine, physician chairman of the Utilization Review and Quality Assurance, Director of Laboratory, Director of Medical Records and Director of Nursing Services.

Decatur County Memorial Hospital exists to improve the health of the community. Elderly patients often become ill and are admitted to the hospital for treatment. Many times the immediate illness is treated, but a medical decision is made at the patient's and family's request and in consultation with the attending physician, not to perform any heroic life prolonging medical treatment in the event of a sudden medical crisis. The majority of deaths occurred in the 80 year old or older age group. Decatur County Memorial Hospital's mortality rate fell within the predicted range for each diagnosis in 1987.

Forty-four (44) of the seventy-four (74) deaths reported in the statistics were admitted with specific medical instructions not to perform ANY heroic life-prolonging measures. Of the patients with no such instructions, 96.3 were dismissed in good condition.

Many of the medicare patients reported were admitted more than once to the hospital. There were a total of 801 medicare admissions for 510 individuals and only 74 deaths. This reflects a somewhat lower 9.2% mortality rate for medicare admissions. Monitoring the quality of care at Decatur County Memorial Hospital will continue to be an intensely active process.

The Hospital thanks the Health Care Financing Administration for the opportunity to present this response with the published data.

Sincerely,

DECATUR COUNTY MEMORIAL HOSPITAL

David V. Trexler
Executive Director

James C. Miller, M.D.
Chief of Staff

/mlm

DEKALB MEMORIAL HOSPITAL INC

EAST SEVENTH ST
AUBURN, IN 46706

Medicare Hospital Provider Number: 150045

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	518	14	9 - 16	590	13	8 - 15
Cancer	17	53	22 - 68	18	50	19 - 64
Cerebrovascular Accidents	21	19	13 - 48	22	41	13 - 53
Gastrointestinal Catastrophes	5	20	9 - 77	3	0	14 - 86
Infectious Disease	10	50	8 - 66	9	22	7 - 63
Metabolic/Electrolyte Disorders	14	21	7 - 54	13	0	7 - 39
Pulmonary Disease	33	15	11 - 39	34	21	8 - 38
Renal Failure	5	40	9 - 84	7	71	15 - 83
Severe Acute Heart Disease	22	41	17 - 58	18	61	19 - 63
Severe Chronic Heart Disease	42	19	10 - 36	31	39	8 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	47	6	0 - 31	57	2	0 - 18
Gynecologic Disease	11	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	47	2	0 - 19	63	5	0 - 23
Musculoskeletal/Skin Conditions	34	0	0 - 19	42	7	0 - 66
Neuropsychiatric/Sensory Disease	15	13	0 - 86	16	6	0 - 96
Urologic Disease	17	0	0 - 86	22	0	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	77
Occupancy Rate (%):	40
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	18
Percent of Physicians Who Are Board Certified Specialists:	56
Interns and Residents:	0
Registered Nurses:	52
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

DeKalb Memorial
Hospital, Inc.

East Seventh Street
Auburn, Indiana 46706
(219) 925-4600

October 20, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Hospital ID: 150045

Dear Dr. Roper:

Thank you for the opportunity to respond to the release of data on hospital mortality rates.

Albeit the published hospital characteristics will be updated from the 1987 American Hospital Association's data, we feel it necessary to amend the number of beds and the type of specialty services we offer. DeKalb Memorial Hospital is a 77 bed general acute-care facility. Our specialty services include a coronary/intensive care unit and oncology services.

Upon receipt of the report, it has been carefully reviewed by hospital adminstration, the Utilization Review/Medical Records Committee of the Medical Staff, the Utilization Review Coordinator, and the Quality Assurance Coordinator.

The Medicare Hospital Mortality Information for 1987, as well as 1986, reveals that DeKalb Memorial Hospital falls within the range of predicted mortality rates for all categories.

In regards to the 1987 release, 40.5% of the cases cited were discharged alive. After physician review no remarkable quality issue was detected. These patients were elderly, exceedingly ill, and death was not unexpected.

HCFA purports that the information by itself is not a complete measure of the quality of care at an individual hospital. We view it as just one aspect of DeKalb Memorial Hospital's overall quality assurance program.

Sincerely,

Jack M. Corey
President

DUKES MEMORIAL HOSPITAL

GRANT AND BOULEVARD
PERU, IN 46970

Medicare Hospital Provider Number: 150067

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	544	13	9 - 16	513	16	10 - 18
Cancer	6	67	18 - 84	7	71	15 - 77
Cerebrovascular Accidents	26	38	13 - 50	14	43	9 - 59
Gastrointestinal Catastrophes	1	0	0 -100	4	0	10 - 74
Infectious Disease	3	67	4 - 86	6	50	9 - 77
Metabolic/Electrolyte Disorders	15	20	11 - 55	20	20	11 - 50
Pulmonary Disease	48	27	15 - 42	53	32	15 - 42
Renal Failure	2	100	2 - 90	2	50	3 - 93
Severe Acute Heart Disease	21	38	22 - 63	28	61	26 - 62
Severe Chronic Heart Disease	32	25	9 - 41	43	26	12 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	69	4	1 - 17	61	5	0 - 24
Gynecologic Disease	9	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	57	5	1 - 19	52	8	0 - 25
Musculoskeletal/Skin Conditions	36	6	0 - 69	30	0	0 - 25
Neuropsychiatric/Sensory Disease	12	0	0 - 91	11	0	0 -100
Urologic Disease	13	0	0 - 85	15	7	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	110
Occupancy Rate (%):	33
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	28
Percent of Physicians Who Are Board Certified Specialists:	96
Interns and Residents:	0
Registered Nurses:	45
Licensed Practical Nurses:	16

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

DUNN MEMORIAL HOSPITAL

1616 23RD STREET
BEDFORD, IN 47421

Medicare Hospital Provider Number: 150049

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	734	12	9 - 15	689	12	10 - 16
Cancer	9	100	32 - 70	13	54	17 - 68
Cerebrovascular Accidents	34	18	17 - 44	25	16	12 - 43
Gastrointestinal Catastrophes	13	31	11 - 62	6	33	4 - 73
Infectious Disease	3	33	8 - 89	5	20	12 - 79
Metabolic/Electrolyte Disorders	9	11	6 - 57	13	23	6 - 56
Pulmonary Disease	59	31	16 - 42	74	24	17 - 39
Renal Failure	1	100	3 - 98	5	40	6 - 82
Severe Acute Heart Disease	14	57	23 - 71	25	40	22 - 60
Severe Chronic Heart Disease	42	17	15 - 39	46	22	14 - 39
Severe Trauma	2	0	0 - 95	0	-	-
Gastrointestinal Disease	84	5	0 - 16	64	5	0 - 23
Gynecologic Disease	14	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	104	1	1 - 7	101	3	1 - 10
Musculoskeletal/Skin Conditions	57	2	0 - 20	49	4	0 - 25
Neuropsychiatric/Sensory Disease	14	7	0 - 82	17	0	0 - 98
Urologic Disease	17	0	0 - 70	14	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	137
Occupancy Rate (%):	33
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	25
Percent of Physicians Who Are Board Certified Specialists:	60
Interns and Residents:	0
Registered Nurses:	69
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

DUNN MEMORIAL HOSPITAL
1600 23rd St. Bedford, Indiana 47421 • (812) 275-3331

October 24, 1988

William L. Roper, M.D.
Administrator
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

I received your letter regarding Medicare Hospital Mortality Information for 1987.

It is noted that the data for Dunn Memorial Hospital, provider #150049, is incorrect. Attached please find a copy of AHA 1987 Annual Survey of Hospitals Selected Data Used by HCFA. Please note that there are discrepancies between the reports. In particular, you indicate that Dunn Memorial Hospital does not have a coronary care unit when, in fact, we do have a coronary care unit.

In addition, we would like to comment on two diagnostic catagories, cancer and renal failure. It should be noted that there were only nine Medicare cancer deaths, and in each case, the patient was admitted for routine terminal care; cancer patients receiving radiation therapy or advanced chemotherapy are always transferred to other facilities. And there was only one Medicare renal failure patient who died at Dunn Memorial Hospital in 1987.

Sincerely,

Richard W. Hahn
Executive Director

/jlw

ELKHART GENERAL HOSPITAL

600 EAST BOULEVARD
ELKHART, IN 46514

Medicare Hospital Provider Number: 150018

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,385	10	9 - 14	2,287	11	9 - 14
Cancer	102	39	28 - 51	97	39	30 - 53
Cerebrovascular Accidents	108	28	18 - 37	113	23	21 - 38
Gastrointestinal Catastrophes	22	45	21 - 64	35	37	22 - 58
Infectious Disease	21	29	14 - 55	20	30	16 - 58
Metabolic/Electrolyte Disorders	25	24	10 - 48	19	11	8 - 44
Pulmonary Disease	91	19	15 - 35	82	17	13 - 33
Renal Failure	9	22	13 - 74	11	36	10 - 73
Severe Acute Heart Disease	99	39	26 - 48	107	37	28 - 49
Severe Chronic Heart Disease	161	21	15 - 30	132	23	16 - 32
Severe Trauma	6	0	7 - 60	3	0	2 - 80
Gastrointestinal Disease	168	1	1 - 6	140	1	1 - 7
Gynecologic Disease	29	0	0 -100	33	0	0 - 99
Low-Risk Heart Disease	186	1	2 - 6	191	1	2 - 5
Musculoskeletal/Skin Conditions	279	2	1 - 6	245	3	0 - 7
Neuropsychiatric/Sensory Disease	136	1	0 - 11	144	3	0 - 13
Urologic Disease	134	0	0 - 6	142	1	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	354
Occupancy Rate (%):	59
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	93
Percent of Physicians Who Are Board Certified Specialists:	9
Interns and Residents:	0
Registered Nurses:	251
Licensed Practical Nurses:	39

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Elkhart General Hospital

P.O. BOX 1329 • ELKHART, INDIANA • 46515 • TELEPHONE (219) 294-2621

October 4, 1988

150018

Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

ATTN: Mrs. Sandra Kappert

Dear Mrs. Kappert;

We would like to make the following correction to our Medicare Hospital Mortality information.

Our hospital bed size in 1986 was 354 beds with an occupancy rate of 61.2%. In 1987 our bed size was also 354 with a occupancy of 58.9%.

Your attention to these corrections would be appreciated.

Sincerely,

Robert Granger
Vice President Finance

RG/man

FAYETTE MEM HOSP ASSOC INC

1941 VIRGINIA AVE
CONNERSVILLE, IN 47331

Medicare Hospital Provider Number: 150064

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	765	15	11 - 17	786	13	10 - 16
Cancer	4	25	6 - 80	11	64	17 - 70
Cerebrovascular Accidents	31	42	14 - 49	22	27	11 - 49
Gastrointestinal Catastrophes	5	60	8 - 80	7	14	7 - 66
Infectious Disease	15	13	15 - 55	15	13	19 - 59
Metabolic/Electrolyte Disorders	20	20	12 - 52	27	26	8 - 45
Pulmonary Disease	88	26	15 - 36	85	26	15 - 36
Renal Failure	3	0	13 - 88	5	60	13 - 88
Severe Acute Heart Disease	29	38	26 - 62	30	50	27 - 62
Severe Chronic Heart Disease	48	35	17 - 44	51	18	15 - 37
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	57	4	0 - 22	86	1	1 - 9
Gynecologic Disease	8	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	102	6	1 - 13	88	0	2 - 7
Musculoskeletal/Skin Conditions	39	3	1 - 21	45	4	0 - 28
Neuropsychiatric/Sensory Disease	12	8	0 - 88	16	13	0 -100
Urologic Disease	40	7	0 - 39	36	6	0 - 45

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	93
Occupancy Rate (%):	44
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	23
Percent of Physicians Who Are Board Certified Specialists:	48
Interns and Residents:	0
Registered Nurses:	66
Licensed Practical Nurses:	9

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

FLOYD MEMORIAL HOSPITAL

1850 STATE STREET
NEW ALBANY, IN 47150

Medicare Hospital Provider Number: 150044

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,185	13	10 - 15	2,127	13	10 - 15
Cancer	57	39	26 - 54	76	36	32 - 57
Cerebrovascular Accidents	80	38	18 - 41	56	39	18 - 44
Gastrointestinal Catastrophes	27	37	23 - 62	11	27	16 - 68
Infectious Disease	16	38	13 - 60	9	78	8 - 63
Metabolic/Electrolyte Disorders	51	45	20 - 52	38	47	14 - 49
Pulmonary Disease	126	27	20 - 39	134	28	18 - 36
Renal Failure	8	88	20 - 80	7	57	15 - 84
Severe Acute Heart Disease	68	41	28 - 53	78	41	28 - 51
Severe Chronic Heart Disease	112	30	14 - 33	98	24	16 - 35
Severe Trauma	1	100	1 - 97	2	50	2 - 92
Gastrointestinal Disease	182	2	1 - 7	141	6	1 - 12
Gynecologic Disease	32	0	0 -100	20	0	0 -100
Low-Risk Heart Disease	287	5	2 - 8	269	2	2 - 6
Musculoskeletal/Skin Conditions	167	2	1 - 7	191	3	0 - 8
Neuropsychiatric/Sensory Disease	84	4	0 - 19	62	5	0 - 27
Urologic Disease	68	1	0 - 18	91	2	0 - 12

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

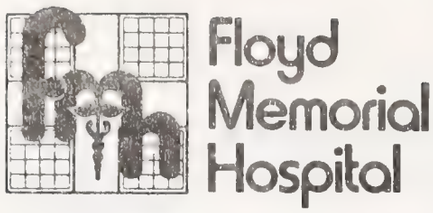
Total Beds (#):	266
Occupancy Rate (%):	55
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	88
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	0
Registered Nurses:	134
Licensed Practical Nurses:	27

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No



October 13, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department Of Health & Human Resources
Washington, D.C. 20201

Dear Dr. Roper,

Thank you for the opportunity to comment on the HCFA release of data concerning hospital mortality rates for the period of January 1 through December 31, 1987. We are pleased to see that Floyd Memorial Hospital's overall mortality rate is again well within the probability range predicted by HCFA's statistical model.

We congratulate you on your organization's early efforts to develop predicted ranges of mortality rates. However, as you know, the method HCFA has devised to compute these ranges of probable mortality still fails to consider many important factors that very often have a dramatic impact on the survival of an illness or injury.

A team of Medical Records, clinical and administrative personnel have reviewed pertinent records and found only minor errors in the data reported by HCFA. Following are corrections to the Hospital Characteristics portion of your report as shown in the AHA 1986 Annual Survey of Hospitals:

CATEGORY	YOUR REPORT	CORRECT INFORMATION
BEDS (#)	192	270
PERCENT OF PHYSICIANS WHO ARE BOARD CERTIFIED SPECIALISTS	43	70
REGISTERED NURSES PER BED	0.63	0.45
LICENSED PRACTICAL NURSES PER BED	0.13	0.09

We offer the following hospital description as information that HCFA or any interested member of the public should find useful in interpreting the data generated by the HCFA statistical model:

(continued)

Floyd Memorial Hospital is a 270-bed acute care facility whose case mix includes many patients with major medical and surgical illnesses. We are one of only two hospitals in the Metropolitan Louisville area with an active, broadly-based Community Hospital Cancer Program fully certified and accredited by the American College of Surgeons Commission on Cancer. While we do have a high proportion of oncology and radiation therapy patients, we also offer a full range of care in specialty areas that include rehabilitative medicine, chemical dependency, major orthopedic care, as well as general medicine and surgery.

Finally, we would like to add that our hospital Medical Staff Committees monitor every death in our facility on an ongoing basis. We believe that our patient care evaluation systems provide us with continuous feedback that enables us to provide excellent medical care.

Again, thank you for this opportunity to provide information useful in interpreting the data generated by HCFA's statistical model.

Sincerely,

John B. White

Mr. John B. White
President
Floyd Memorial Hospital

GEORGE ADE MEM HOSP

STATE HWY 16
BROOK, IN 47922

Medicare Hospital Provider Number: 150081

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	124	15	9 - 22	123	12	7 - 20
Cancer	3	67	4 - 86	1	100	1 - 97
Cerebrovascular Accidents	12	33	10 - 61	2	0	1 - 89
Gastrointestinal Catastrophes	3	33	3 - 86	1	0	0 - 99
Infectious Disease	1	0	2 - 97	5	40	12 - 83
Metabolic/Electrolyte Disorders	3	0	0 - 94	3	0	0 - 93
Pulmonary Disease	8	25	4 - 65	9	22	10 - 64
Renal Failure	0	-	-	1	100	3 - 98
Severe Acute Heart Disease	4	50	7 - 83	2	0	1 - 89
Severe Chronic Heart Disease	12	33	7 - 59	8	25	4 - 64
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	8	0	0 -100	17	0	0 - 46
Gynecologic Disease	2	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	9	0	0 - 97	15	7	0 - 52
Musculoskeletal/Skin Conditions	5	0	0 -100	8	0	0 -100
Neuropsychiatric/Sensory Disease	2	0	0 -100	1	0	0 -100
Urologic Disease	8	0	0 -100	5	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	63
Occupancy Rate (%):	52
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	6
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GIBSON GEN HOSP

1808 SHERMAN DR
PRINCETON, IN 47670

Medicare Hospital Provider Number: 150020

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	493	13	10 - 16	542	14	10 - 17
Cancer	10	60	14 - 70	8	25	17 - 74
Cerebrovascular Accidents	29	52	12 - 48	22	23	11 - 48
Gastrointestinal Catastrophes	3	33	6 - 88	6	33	8 - 75
Infectious Disease	7	14	10 - 67	2	100	3 - 88
Metabolic/Electrolyte Disorders	8	13	1 - 64	14	36	9 - 59
Pulmonary Disease	41	15	14 - 39	54	31	16 - 43
Renal Failure	6	67	14 - 84	6	83	12 - 80
Severe Acute Heart Disease	22	27	18 - 56	25	44	21 - 60
Severe Chronic Heart Disease	25	16	10 - 41	34	29	12 - 43
Severe Trauma	0	-	-	1	100	0 - 98
Gastrointestinal Disease	40	5	0 - 31	41	2	1 - 19
Gynecologic Disease	5	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	57	0	1 - 9	56	0	2 - 9
Musculoskeletal/Skin Conditions	36	6	0 - 41	50	2	0 - 28
Neuropsychiatric/Sensory Disease	12	0	0 -100	14	0	0 -100
Urologic Disease	12	8	0 - 62	17	6	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	118
Occupancy Rate (%):	52
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	15
Percent of Physicians Who Are Board Certified Specialists:	80
Interns and Residents:	0
Registered Nurses:	38
Licensed Practical Nurses:	9

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GOOD SAMARITAN HOSPITAL

520 SOUTH 7TH STREET
VINCENNES, IN 47591

Medicare Hospital Provider Number: 150042

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,564	12	9 - 14	2,570	11	10 - 14
Cancer	91	37	28 - 52	88	36	29 - 53
Cerebrovascular Accidents	82	28	16 - 37	101	17	19 - 36
Gastrointestinal Catastrophes	11	18	12 - 61	15	27	18 - 64
Infectious Disease	43	33	22 - 54	27	19	22 - 55
Metabolic/Electrolyte Disorders	63	30	14 - 43	60	27	14 - 42
Pulmonary Disease	147	31	18 - 37	143	24	19 - 36
Renal Failure	10	30	18 - 79	26	31	19 - 71
Severe Acute Heart Disease	61	52	28 - 54	82	44	28 - 51
Severe Chronic Heart Disease	136	28	16 - 33	119	27	15 - 33
Severe Trauma	4	0	2 - 73	5	0	13 - 70
Gastrointestinal Disease	211	0	2 - 6	205	1	2 - 6
Gynecologic Disease	29	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	332	3	2 - 6	288	3	2 - 7
Musculoskeletal/Skin Conditions	263	2	1 - 6	262	1	1 - 5
Neuropsychiatric/Sensory Disease	90	0	1 - 7	96	5	1 - 13
Urologic Disease	140	4	0 - 15	137	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	289
Occupancy Rate (%):	62
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	82
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	0
Registered Nurses:	233
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Good Samaritan Hospital
520 South Seventh Street
Vincennes, Indiana 47591
(812) 882-5220

Medicare Provider
Number: 150042

October 11, 1988

Health Standards & Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

To Whom It May Concern:

We have carefully reviewed the mortality information about Medicare patients treated at Good Samaritan Hospital in 1987. In general, we feel the data is accurate and well presented.

We found only one instance where a duplication of data exists.

[redacted] - Your report listed this patient twice, with the name and sex different, but all other data elements are the same.

Our records indicate the second patient listed is correct.

We found two instances where incorrect principal diagnoses were listed.

[redacted] - Your report indicated the principal diagnosis was 969.1 (poisoning by Phenothiozine-based tranquilizers), thus in the All Other Diseases diagnostic category.

Our records indicate 295.14 (disorganized type schizophrenia, chronic state with acute exacerbation) was submitted as the principal diagnosis to the fiscal intermediary. The principal diagnosis of 295.14 would place it in the Neuropsychiatric and Sensory disease diagnostic category.

[redacted] - Your report indicated the principal diagnosis was 997.3 (respiratory complications, not elsewhere classified.

Our records indicate 799.1 (respiratory arrest) was submitted as the principal diagnosis to the fiscal intermediary.

Again this year, we checked death certificates on file at our local City/County Health Department for any patients identified in your data who died after discharge, but within 30 days from date of admission to our facility. We only found one case where the patient died of a condition unrelated to what they were treated for in our facility.

[redacted] - Your report and our records indicate the principal diagnosis for the hospitalization was 820.02 (fracture of femur). The death certificate stated the patient died from a gunshot wound to the head.

We appreciate the opportunity given us to review data regarding our facility prior to its release to the public.

Sincerely,

A. John Hidde
Executive Director

AJH/lal

GOSHEN GENERAL HOSPITAL

200 HIGH PARK AVENUE
GOSHEN, IN 46526

Medicare Hospital Provider Number: 150026

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,227	11	8 - 13	1,194	11	8 - 13
Cancer	28	54	23 - 61	25	48	22 - 61
Cerebrovascular Accidents	60	38	16 - 42	52	25	17 - 41
Gastrointestinal Catastrophes	7	14	9 - 67	7	14	7 - 65
Infectious Disease	12	25	15 - 64	6	0	16 - 66
Metabolic/Electrolyte Disorders	17	29	8 - 54	10	20	6 - 59
Pulmonary Disease	54	30	14 - 40	52	25	15 - 41
Renal Failure	4	0	13 - 81	3	33	3 - 87
Severe Acute Heart Disease	33	48	26 - 60	52	56	26 - 54
Severe Chronic Heart Disease	71	20	14 - 34	59	24	13 - 36
Severe Trauma	0	-	-	4	25	4 - 80
Gastrointestinal Disease	128	4	1 - 11	117	3	1 - 10
Gynecologic Disease	13	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	114	3	1 - 9	114	4	1 - 11
Musculoskeletal/Skin Conditions	151	5	1 - 11	149	4	0 - 11
Neuropsychiatric/Sensory Disease	16	0	0 - 85	21	0	0 - 59
Urologic Disease	97	1	0 - 22	83	1	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	160
Occupancy Rate (%):	53
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	64
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	0
Registered Nurses:	142
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No



October 5, 1988 MEDICARE PROVIDER: 150026

Health Standards and Quality Bureau
HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: 1986 and 1987 MEDICARE HOSPITAL MORTALITY INFORMATION COMMENTS

We have received the Medicare Hospital Mortality Information for the calendar years 1986 and 1987 and we wish to make the following comments:

1. The comments regarding the 1986 mortality data were provided October 22, 1987 and should be referenced in reviewing 1986 mortality rates.

2. We have reviewed the 1987 mortality rate and find the actual mortality rates in all categories to be within the range for predicted mortality as Medicare has calculated.

3. We agree with the comment made to all hospitals by William L. Roper, M.D., Administrator, Department of Health and Human Services Healthcare Financing Administration in a letter dated September 15, 1988. "While we believe that information on hospital mortality rates is useful, until we have developed additional statistical measures to deal with complex issues such as severity of illness, we cannot and do not recommend the use of the information by itself to make judgements about the quality of care in an individual hospital or to make comparisons among hospitals."

4. The information will be reviewed by the hospital's Medical Staff Quality Assurance Committee, although the HCFA Mortality Data Information is limited in scope.

5. The 1986 Hospital Characteristics Survey Report does not appear accurate since we are licensed for 160 beds, currently operate 135 beds, and plan to change the number of beds based upon census and demand. Therefore, the staffing per bed numbers for Registered Nurses and Licensed Practical Nurses would change based upon your definition of bed, i.e., licensed, operating, or occupied.

6. The specialty services report on the preliminary report should be corrected to show that Goshen General Hospital does have a Coronary Care Unit as part of its ICU and a Hospice Care Services which is accredited by the Joint Commission on Accreditation of Healthcare Organizations.

We would like to assure you we plan to continue to review and analyze this data. We also intend to utilize the mortality data as a guide in our on-going quality assurance and peer review process in order to continue to provide our community with the best possible health care.

GREENE COUNTY GENERAL HOSPITAL

RR 1 BOX 453
LINTON, IN 47441

Medicare Hospital Provider Number: 150066

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	597	15	11 - 17	639	17	11 - 18
Cancer	7	57	9 - 73	13	69	20 - 69
Cerebrovascular Accidents	25	24	16 - 50	28	36	16 - 51
Gastrointestinal Catastrophes	1	0	0 - 97	7	43	13 - 77
Infectious Disease	12	33	12 - 63	7	43	12 - 76
Metabolic/Electrolyte Disorders	15	27	6 - 54	13	31	5 - 58
Pulmonary Disease	44	25	15 - 43	41	17	15 - 40
Renal Failure	0	-	-	3	67	7 - 89
Severe Acute Heart Disease	44	39	28 - 57	55	45	25 - 52
Severe Chronic Heart Disease	53	32	12 - 38	53	28	10 - 35
Severe Trauma	3	0	4 - 79	0	-	-
Gastrointestinal Disease	63	3	0 - 17	55	0	1 - 10
Gynecologic Disease	10	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	81	4	1 - 14	68	10	0 - 27
Musculoskeletal/Skin Conditions	33	3	0 - 40	42	2	0 - 30
Neuropsychiatric/Sensory Disease	12	0	0 - 49	10	0	0 - 96
Urologic Disease	15	7	0 -100	18	11	0 - 90

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	76
Occupancy Rate (%):	34
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	26
Percent of Physicians Who Are Board Certified Specialists:	50
Interns and Residents:	0
Registered Nurses:	29
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HANCOCK MEMORIAL HOSPITAL

P O BOX 827 801 NORTH STATE ST
GREENFIELD, IN 46140

Medicare Hospital Provider Number: 150037

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	889	14	11 - 16	917	13	10 - 16
Cancer	19	37	19 - 62	20	45	21 - 64
Cerebrovascular Accidents	39	31	14 - 44	35	23	15 - 44
Gastrointestinal Catastrophes	11	64	13 - 68	7	57	8 - 73
Infectious Disease	35	29	19 - 52	24	21	20 - 56
Metabolic/Electrolyte Disorders	19	32	8 - 52	23	43	9 - 52
Pulmonary Disease	53	26	12 - 38	47	28	12 - 40
Renal Failure	3	33	12 - 94	5	80	15 - 86
Severe Acute Heart Disease	39	38	25 - 56	51	37	28 - 56
Severe Chronic Heart Disease	50	26	12 - 37	47	21	12 - 37
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	69	1	1 - 11	83	6	1 - 16
Gynecologic Disease	10	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	95	3	2 - 11	91	5	1 - 14
Musculoskeletal/Skin Conditions	75	4	1 - 14	88	2	1 - 11
Neuropsychiatric/Sensory Disease	19	0	0 - 70	22	9	0 - 70
Urologic Disease	45	7	0 - 70	50	0	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	120
Occupancy Rate (%):	42
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	39
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	0
Registered Nurses:	79
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Hancock Memorial Hospital

801 N. State Street Greenfield, IN 46140
(317) 462-5544

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
Baltimore, Maryland 21201

Medicare Provider 15-0037

Dear Mrs. Kappert:

Hancock Memorial Hospital staff have reviewed the HCFA mortality information about Medicare patients treated at this hospital in 1987. We appreciate the opportunity to verify and analyze the data and to submit information from our quality review activities.

The HCFA data regarding dates of admission and number and dates of death have been validated by the hospital Medical Record Department and Administration. The date of death was incorrect for one patient on the patient-specific listing. Also, the Coronary Care Unit indicator should be changed to "yes".

The monitoring of patient care to ensure quality is an ongoing, continuous process at Hancock Memorial Hospital. The Quality Assurance program here includes Medical Staff committee review of the medical records of patient deaths at this facility.

Physician review of the hospital deaths listed in HCFA's data determined death to be the expected outcome or a significant possibility in each case based on end-stage disease process, multisystem complications or condition at the time of admission. Criteria for quality of care were met. Seventy-four percent(74%) of the medical records document physician and patient and/or family agreement that extraordinary resuscitative measures should not be taken. In all cases, death was not reasonably preventable with medical intervention.

Review of the twenty-eight (28) cases in which death occurred after discharge verified that in each case, the medical record documented a terminal condition or very guarded prognosis.

Thank you again for the opportunity to comment on the mortality data. If you or anyone receiving this information has additional questions, please do not hesitate to call.

Sincerely,

Fuad M. Hammoudeh
President

Craig Spence, M.D.
Chief of Medical Staff

HARRISON COUNTY HOSPITAL

245 ATWOOD STREET
CORYDON, IN 47112

Medicare Hospital Provider Number: 150079

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	539	16	10 - 17	485	15	10 - 18
Cancer	8	13	11 - 64	12	67	18 - 69
Cerebrovascular Accidents	33	36	12 - 45	26	27	13 - 48
Gastrointestinal Catastrophes	5	60	6 - 78	4	25	5 - 80
Infectious Disease	4	75	4 - 80	4	25	4 - 80
Metabolic/Electrolyte Disorders	19	37	14 - 58	10	30	8 - 64
Pulmonary Disease	51	33	17 - 45	48	33	15 - 43
Renal Failure	1	100	3 - 99	1	0	0 - 98
Severe Acute Heart Disease	27	44	22 - 59	30	27	24 - 57
Severe Chronic Heart Disease	22	32	7 - 47	24	25	8 - 44
Severe Trauma	1	100	0 - 98	0	-	-
Gastrointestinal Disease	45	4	1 - 21	45	2	0 - 24
Gynecologic Disease	4	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	62	3	0 - 17	55	4	0 - 20
Musculoskeletal/Skin Conditions	31	3	0 - 51	21	0	0 - 53
Neuropsychiatric/Sensory Disease	14	0	0 - 92	13	8	0 -100
Urologic Disease	24	4	0 - 94	14	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	68
Occupancy Rate (%):	35
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	18
Percent of Physicians Who Are Board Certified Specialists:	44
Interns and Residents:	0
Registered Nurses:	28
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HENDRICKS COMMUNITY HOSPITAL

1000 EAST MAIN STREET
DANVILLE, IN 46122

Medicare Hospital Provider Number: 150005

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,030	13	11 - 17	1,070	16	11 - 16
Cancer	28	43	22 - 59	29	55	24 - 61
Cerebrovascular Accidents	50	26	16 - 41	56	25	16 - 40
Gastrointestinal Catastrophes	9	33	14 - 72	4	50	5 - 82
Infectious Disease	14	50	14 - 64	12	25	15 - 64
Metabolic/Electrolyte Disorders	33	12	11 - 41	19	32	8 - 52
Pulmonary Disease	82	34	16 - 39	110	35	16 - 37
Renal Failure	1	100	3 - 98	4	50	6 - 85
Severe Acute Heart Disease	44	30	29 - 57	41	34	26 - 56
Severe Chronic Heart Disease	68	21	16 - 36	61	21	12 - 35
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	70	7	1 - 19	79	4	1 - 14
Gynecologic Disease	9	0	0 -100	20	0	0 -100
Low-Risk Heart Disease	119	4	1 - 11	109	4	2 - 11
Musculoskeletal/Skin Conditions	66	5	0 - 19	52	2	1 - 15
Neuropsychiatric/Sensory Disease	30	7	0 - 48	36	6	0 - 74
Urologic Disease	60	2	0 - 22	50	2	0 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	127
Occupancy Rate (%):	54
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	61
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	109
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HENRY COUNTY MEMORIAL HOSPITAL

1000 NORTH 16TH STREET
NEW CASTLE, IN 47362

Medicare Hospital Provider Number: 150030

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,086	13	10 - 15	1,097	14	10 - 15
Cancer	12	33	13 - 64	21	43	18 - 60
Cerebrovascular Accidents	46	35	14 - 42	51	35	16 - 43
Gastrointestinal Catastrophes	10	30	12 - 67	14	71	13 - 61
Infectious Disease	9	44	15 - 73	15	33	13 - 60
Metabolic/Electrolyte Disorders	16	19	4 - 50	13	31	4 - 58
Pulmonary Disease	90	24	16 - 36	48	31	12 - 41
Renal Failure	3	0	12 - 87	2	0	11 - 97
Severe Acute Heart Disease	79	46	28 - 52	71	35	26 - 50
Severe Chronic Heart Disease	68	16	14 - 34	67	24	14 - 36
Severe Trauma	2	0	0 - 94	2	0	0 - 93
Gastrointestinal Disease	77	0	0 - 8	87	1	1 - 9
Gynecologic Disease	18	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	124	2	1 - 9	130	3	1 - 9
Musculoskeletal/Skin Conditions	52	0	0 - 12	65	3	0 - 22
Neuropsychiatric/Sensory Disease	24	0	0 - 66	27	4	0 - 51
Urologic Disease	58	0	0 - 21	51	4	0 - 57

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	143
Occupancy Rate (%):	39
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	35
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	0
Registered Nurses:	85
Licensed Practical Nurses:	27

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HOLY CROSS PARKVIEW HOSPITAL

1915 LAKE AVE P O BOX 670
PLYMOUTH, IN 46563

Medicare Hospital Provider Number: 150076

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	579	15	8 - 15	495	13	8 - 15
Cancer	7	71	19 - 80	5	80	15 - 82
Cerebrovascular Accidents	28	36	12 - 47	26	19	12 - 44
Gastrointestinal Catastrophes	2	50	0 - 95	3	67	1 - 87
Infectious Disease	6	33	6 - 74	6	50	5 - 75
Metabolic/Electrolyte Disorders	10	40	6 - 65	28	11	7 - 38
Pulmonary Disease	33	18	11 - 40	25	44	11 - 50
Renal Failure	2	100	8 - 93	0	-	-
Severe Acute Heart Disease	26	50	22 - 59	20	45	16 - 58
Severe Chronic Heart Disease	38	26	11 - 40	42	29	13 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	42	5	0 - 25	47	4	1 - 21
Gynecologic Disease	7	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	71	8	1 - 21	54	0	1 - 10
Musculoskeletal/Skin Conditions	45	2	0 - 25	34	3	0 - 65
Neuropsychiatric/Sensory Disease	7	0	0 - 91	9	0	0 -100
Urologic Disease	49	8	0 - 45	34	3	0 - 66

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	58
Occupancy Rate (%):	43
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	34
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	34
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HOWARD COMM HOSP

3500 S LA FOUNTAIN ST
KOKOMO, IN 46901

Medicare Hospital Provider Number: 150007

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	875	13	7 - 12	837	12	7 - 13
Cancer	17	35	15 - 60	22	50	24 - 66
Cerebrovascular Accidents	24	38	12 - 50	20	30	10 - 51
Gastrointestinal Catastrophes	8	50	12 - 74	7	0	13 - 60
Infectious Disease	4	75	5 - 80	9	22	11 - 66
Metabolic/Electrolyte Disorders	16	25	6 - 52	12	17	4 - 54
Pulmonary Disease	45	27	11 - 39	41	32	16 - 46
Renal Failure	8	50	16 - 82	1	100	3 - 98
Severe Acute Heart Disease	25	44	20 - 58	29	45	20 - 56
Severe Chronic Heart Disease	46	43	12 - 41	39	33	10 - 41
Severe Trauma	1	100	2 - 97	2	0	1 - 89
Gastrointestinal Disease	84	4	0 - 15	72	3	0 - 18
Gynecologic Disease	21	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	136	4	1 - 11	120	5	1 - 12
Musculoskeletal/Skin Conditions	105	1	0 - 11	94	2	0 - 22
Neuropsychiatric/Sensory Disease	33	3	0 - 67	75	0	0 - 28
Urologic Disease	44	0	0 - 32	41	0	0 - 37

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	216
Occupancy Rate (%):	46
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	94
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	112
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HUMANA WOMEN'S HOSPITAL INDIANAPOLIS

8111 TOWNSHIP LINE ROAD
INDIANAPOLIS , IN 46260

Medicare Hospital Provider Number: 150136

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	36	0	0 - 17	36	0	0 - 18
Cancer	1	0	0 - 98	1	0	0 - 99
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	1	0	0 -100	1	0	0 -100
Gynecologic Disease	18	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	0	-	-	0	-	-
Musculoskeletal/Skin Conditions	0	-	-	0	-	-
Neuropsychiatric/Sensory Disease	0	-	-	0	-	-
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	150
Ownership/Control:	Private, For Profit

STAFFING

Interns and Residents:	0
Registered Nurses:	116
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Humana Women's Hospital
Indianapolis

Medicare Provider No.
150136

October 21, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Blvd.
Baltimore, Maryland 21207

Dear Mrs. Kappert:

I appreciate the opportunity to comment on the Medicare patient mortality data and the hospital profile characteristics to be published by the Health Care Financing Administration. The information does serve as a part of this hospital's and the health care industry's ongoing quality assurance programs.

HCFA's efforts to provide our hospital specifically, and the health care industry in general, with quality assurance information should be commended.

I also appreciate your public position that even though attempts have been made to further refine the manipulation of the data, this information is limited and cannot be used as a complete measure of quality.

I am very proud of our quality assurance program that is in place at Humana Women's Hospital-Indianapolis; it is well-established and includes routine review by the Joint Commission on Accreditation of Healthcare Organizations and other outside review agencies, ongoing utilization review, quality assurance, in-hospital morbidity and mortality reviews and analyses of all inpatient mortality.

The raw numbers that you have provided in this release further assist us in confirming our records and in analyzing Medicare patient mortality.

The quality assurance staff has reviewed the statistics provided by HCFA. I also am concerned that the information listed under "Hospital

Characteristics" contains inaccurate figures inconsistent with our hospital records, thus, we are unable to confirm any of that data.

We stand ready to aid our community in reviewing this very complex data and explaining how this type of information is used to affirm and improve the quality of health care services.

Sincerely,

Jay W. Williams
Executive Director
Humana Women's Hospital-Indianapolis

JWW:co

HUNTINGTON MEM HOSP

1215 ETNA AVENUE
HUNTINGTON, IN 46750

Medicare Hospital Provider Number: 150091

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	401	14	8 - 16	404	17	10 - 18
Cancer	7	57	15 - 79	11	55	21 - 75
Cerebrovascular Accidents	19	26	11 - 51	28	32	13 - 48
Gastrointestinal Catastrophes	5	60	4 - 78	5	80	5 - 74
Infectious Disease	5	40	5 - 78	2	0	0 - 92
Metabolic/Electrolyte Disorders	7	29	4 - 69	15	40	10 - 59
Pulmonary Disease	26	19	11 - 44	18	22	10 - 50
Renal Failure	2	100	11 - 97	4	50	10 - 88
Severe Acute Heart Disease	11	36	14 - 67	17	59	20 - 65
Severe Chronic Heart Disease	40	22	11 - 38	45	20	13 - 38
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	35	6	0 - 38	32	3	0 - 35
Gynecologic Disease	11	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	43	2	0 - 22	39	0	0 - 15
Musculoskeletal/Skin Conditions	22	0	0 - 59	29	3	0 - 37
Neuropsychiatric/Sensory Disease	14	0	0 - 99	8	0	0 -100
Urologic Disease	21	10	0 -100	14	7	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	69
Occupancy Rate (%):	48
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	31
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	54
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

INDIANA UNIVERSITY HOSPITALS

1100 WEST MICHIGAN ST
INDIANAPOLIS, IN 46202

Medicare Hospital Provider Number: 150032

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,949	9	9 - 13	1,850	8	9 - 13
Cancer	106	31	30 - 52	106	22	28 - 49
Cerebrovascular Accidents	22	32	15 - 53	32	22	18 - 48
Gastrointestinal Catastrophes	30	30	16 - 52	23	22	20 - 57
Infectious Disease	16	44	15 - 62	12	17	14 - 60
Metabolic/Electrolyte Disorders	15	27	12 - 58	11	18	8 - 58
Pulmonary Disease	36	33	12 - 45	40	25	13 - 42
Renal Failure	45	13	2 - 54	30	23	4 - 58
Severe Acute Heart Disease	43	26	21 - 48	32	47	24 - 59
Severe Chronic Heart Disease	32	22	15 - 45	45	22	17 - 42
Severe Trauma	3	0	4 - 79	4	25	5 - 80
Gastrointestinal Disease	102	8	1 - 17	75	3	1 - 13
Gynecologic Disease	17	6	0 -100	16	0	0 - 39
Low-Risk Heart Disease	241	2	2 - 7	230	7	2 - 10
Musculoskeletal/Skin Conditions	216	2	0 - 7	267	2	1 - 6
Neuropsychiatric/Sensory Disease	93	3	0 - 17	65	3	0 - 23
Urologic Disease	48	2	0 - 53	37	0	0 - 33

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	585
Occupancy Rate (%):	77
Ownership/Control:	State Government

STAFFING

Total Number of Physicians:	656
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	202
Registered Nurses:	977
Licensed Practical Nurses:	34

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

INDIANA UNIVERSITY
HOSPITALS

OFFICE OF THE DIRECTOR
University Hospital C118
1100 West Michigan Street
Indianapolis, Indiana 46223
(317) 274-7303

October 13, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows Building, East
6325 Security Blvd.
Baltimore, Maryland 21207

Dear Mrs. Kappert:

We appreciate the opportunity to comment on the mortality rate information to be released by the Health Care Financing Administration. In reviewing the data pertaining to our Hospitals, we found that some of the data included in the section titled Hospital Characteristics was incorrect and not consistent with the data we filed with the American Hospital Association.

The following chart shows the information included in your report with an additional column which shows the correct information.

Survey and Year: AHA 1986

	As Reported By HCFA	Corrected Data
Beds (#):	240	573
Occupancy Rate (%):	79	79
Ownership/Control:	State	State
Staffing:		
Total Number of Physicians:	647	647
Percent of Physicians who are Board Certified Specialists:	70	75
Interns and Residents per Bed:	0.78	0.33
Registered Nurses per Bed:	4.18	1.75
Licensed Practical Nurses per Bed:	0.15	0.06

We would appreciate it if you could update your records to reflect the correct data.

Sincerely,

David J. Handel

David J. Handel
Director

JACKSON CO SCHNECK MEM HOSP

200 SOUTH WALNUT ST
SEYMOUR, IN 47274

Medicare Hospital Provider Number: 150065

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	895	15	10 - 16	861	15	10 - 16
Cancer	10	30	14 - 68	14	79	24 - 68
Cerebrovascular Accidents	35	29	15 - 45	41	17	18 - 43
Gastrointestinal Catastrophes	11	27	15 - 67	6	17	16 - 77
Infectious Disease	21	62	16 - 58	21	33	16 - 58
Metabolic/Electrolyte Disorders	26	46	15 - 55	14	7	4 - 45
Pulmonary Disease	58	29	16 - 41	50	32	15 - 42
Renal Failure	4	50	11 - 89	8	88	23 - 84
Severe Acute Heart Disease	30	57	24 - 59	38	55	26 - 58
Severe Chronic Heart Disease	75	21	17 - 37	63	30	15 - 39
Severe Trauma	1	0	0 - 98	1	100	2 - 97
Gastrointestinal Disease	107	3	1 - 10	101	3	1 - 11
Gynecologic Disease	9	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	77	3	1 - 12	85	2	1 - 11
Musculoskeletal/Skin Conditions	90	3	0 - 13	69	1	0 - 14
Neuropsychiatric/Sensory Disease	15	13	0 - 97	20	0	0 - 75
Urologic Disease	55	4	0 - 23	51	8	0 - 43

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	106
Occupancy Rate (%):	54
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	33
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	67
Licensed Practical Nurses:	20

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

JASPER COUNTY HOSPITAL

1104 EAST GRACE STREET
RENSSELAER, IN 47978

Medicare Hospital Provider Number: 150078

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	475	12	9 - 15	457	12	9 - 16
Cancer	11	45	22 - 76	9	33	14 - 71
Cerebrovascular Accidents	21	43	11 - 52	13	15	8 - 51
Gastrointestinal Catastrophes	2	50	1 - 93	2	0	2 - 89
Infectious Disease	8	25	11 - 69	8	50	9 - 71
Metabolic/Electrolyte Disorders	4	25	1 - 86	8	25	5 - 66
Pulmonary Disease	32	25	12 - 44	20	30	9 - 50
Renal Failure	2	100	8 - 93	5	40	13 - 88
Severe Acute Heart Disease	14	43	17 - 65	23	30	24 - 62
Severe Chronic Heart Disease	38	21	11 - 38	27	30	13 - 48
Severe Trauma	0	-	-	1	0	0 - 99
Gastrointestinal Disease	33	3	0 - 27	38	5	1 - 26
Gynecologic Disease	8	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	50	0	1 - 10	46	4	1 - 21
Musculoskeletal/Skin Conditions	25	4	0 - 51	37	3	0 - 41
Neuropsychiatric/Sensory Disease	7	0	0 -100	6	0	0 - 83
Urologic Disease	35	0	0 - 57	20	0	0 - 51

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	73
Occupancy Rate (%):	59
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	10
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	55
Licensed Practical Nurses:	15

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

JAY CO HOSP

500 W VOTAW ST
PORTLAND, IN 47371

Medicare Hospital Provider Number: 150031

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	479	15	9 - 17	516	15	9 - 16
Cancer	14	71	20 - 67	15	40	16 - 63
Cerebrovascular Accidents	21	24	15 - 52	26	31	12 - 48
Gastrointestinal Catastrophes	7	14	11 - 69	7	57	8 - 73
Infectious Disease	4	25	7 - 81	4	25	5 - 80
Metabolic/Electrolyte Disorders	19	21	8 - 50	16	31	14 - 60
Pulmonary Disease	23	30	12 - 50	25	28	12 - 48
Renal Failure	0	-	-	2	100	4 - 90
Severe Acute Heart Disease	22	41	22 - 62	27	59	22 - 59
Severe Chronic Heart Disease	22	27	7 - 46	23	17	9 - 42
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	46	7	1 - 25	45	2	0 - 21
Gynecologic Disease	3	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	59	10	1 - 26	56	5	1 - 19
Musculoskeletal/Skin Conditions	39	5	0 - 43	52	0	0 - 12
Neuropsychiatric/Sensory Disease	8	0	0 -100	23	0	0 - 53
Urologic Disease	13	23	0 - 68	15	13	0 - 60

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	65
Occupancy Rate (%):	46
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	27
Percent of Physicians Who Are Board Certified Specialists:	74
Interns and Residents:	0
Registered Nurses:	34
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

JENNINGS COMMUNITY HOSPITAL

301 HENRY STREET
NORTH VERNON, IN 47265

Medicare Hospital Provider Number: 150127

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	295	15	12 - 21	288	18	10 - 20
Cancer	1	100	2 - 98	6	83	13 - 74
Cerebrovascular Accidents	11	36	9 - 62	9	44	9 - 68
Gastrointestinal Catastrophes	1	0	2 - 97	0	-	-
Infectious Disease	7	29	12 - 74	5	40	7 - 79
Metabolic/Electrolyte Disorders	13	0	7 - 40	13	23	7 - 56
Pulmonary Disease	57	21	18 - 42	42	24	13 - 41
Renal Failure	1	0	3 - 98	0	-	-
Severe Acute Heart Disease	13	62	15 - 65	13	62	18 - 68
Severe Chronic Heart Disease	15	27	9 - 54	22	50	14 - 55
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	23	0	0 - 38	34	12	0 - 62
Gynecologic Disease	3	0	0 -100	0	-	-
Low-Risk Heart Disease	32	0	0 - 19	25	0	0 - 28
Musculoskeletal/Skin Conditions	8	13	0 -100	11	9	0 - 92
Neuropsychiatric/Sensory Disease	3	0	0 -100	5	0	0 -100
Urologic Disease	4	0	0 -100	19	0	0 - 91

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	48
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

JOHNSON COUNTY MEMORIAL HOSPITAL

1125 WEST JEFFERSON ST
FRANKLIN, IN 46131

Medicare Hospital Provider Number: 150001

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,073	13	10 - 16	993	16	11 - 17
Cancer	35	34	29 - 62	29	45	24 - 61
Cerebrovascular Accidents	42	24	15 - 41	36	42	14 - 47
Gastrointestinal Catastrophes	7	57	14 - 78	15	40	11 - 60
Infectious Disease	12	25	13 - 62	24	38	12 - 52
Metabolic/Electrolyte Disorders	25	32	9 - 49	22	36	8 - 51
Pulmonary Disease	72	25	16 - 38	79	30	15 - 38
Renal Failure	5	80	10 - 81	0	-	-
Severe Acute Heart Disease	47	53	28 - 57	47	23	30 - 56
Severe Chronic Heart Disease	66	14	15 - 33	64	17	16 - 36
Severe Trauma	3	0	2 - 81	2	50	3 - 92
Gastrointestinal Disease	114	3	1 - 10	78	3	1 - 13
Gynecologic Disease	17	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	101	6	1 - 13	107	5	1 - 12
Musculoskeletal/Skin Conditions	83	2	0 - 12	68	3	0 - 18
Neuropsychiatric/Sensory Disease	16	0	0 - 93	19	5	0 - 54
Urologic Disease	48	6	0 - 31	52	4	0 - 22

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	212
Occupancy Rate (%):	39
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	43
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	0
Registered Nurses:	65
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

KENDRICK MEMORIAL HOSPITAL

1201 HADLEY ROAD
MOORESVILLE, IN 46158

Medicare Hospital Provider Number: 150057

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	381	0	1 - 5	302	0	1 - 5
Cancer	2	0	1 - 89	0	-	-
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	1	0	0 - 98	0	-	-
Severe Chronic Heart Disease	1	0	1 - 97	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	46	0	0 - 28	52	0	0 - 27
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	38	0	0 - 30	61	0	0 - 12
Musculoskeletal/Skin Conditions	212	0	0 - 4	91	1	0 - 14
Neuropsychiatric/Sensory Disease	0	-	-	0	-	-
Urologic Disease	1	0	0 -100	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	60
Occupancy Rate (%):	33
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	10
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	38
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

KINGWOOD HOSPITAL

3714 S FRANKLIN ST
MICHIGAN CITY, IN 46360

Medicare Hospital Provider Number: 150083

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	19	0	0 - 83	165	7	8 - 17
Cancer	0	-	-	5	60	7 - 78
Cerebrovascular Accidents	0	-	-	4	0	7 - 71
Gastrointestinal Catastrophes	0	-	-	1	0	0 - 97
Infectious Disease	0	-	-	1	0	3 - 98
Metabolic/Electrolyte Disorders	0	-	-	4	0	4 - 71
Pulmonary Disease	0	-	-	6	17	3 - 69
Renal Failure	0	-	-	1	0	3 - 98
Severe Acute Heart Disease	0	-	-	5	40	15 - 85
Severe Chronic Heart Disease	0	-	-	21	10	12 - 42
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	13	0	0 - 93
Gynecologic Disease	0	-	-	2	0	0 -100
Low-Risk Heart Disease	1	0	0 -100	14	0	0 - 45
Musculoskeletal/Skin Conditions	0	-	-	15	0	0 - 68
Neuropsychiatric/Sensory Disease	12	0	0 -100	31	0	0 - 71
Urologic Disease	0	-	-	6	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	89
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

KOSCIUSKO COMMUNITY HOSPITAL INC

2101 EAST DUBOIS DRIVE
WARSAW, IN 46580

Medicare Hospital Provider Number: 150133

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	786	12	8 - 14	787	14	9 - 15
Cancer	8	88	15 - 67	11	82	17 - 65
Cerebrovascular Accidents	23	17	14 - 46	32	31	15 - 47
Gastrointestinal Catastrophes	2	0	2 - 89	7	43	19 - 82
Infectious Disease	10	40	9 - 66	10	30	13 - 68
Metabolic/Electrolyte Disorders	8	50	12 - 74	19	37	7 - 53
Pulmonary Disease	53	19	14 - 38	56	20	16 - 39
Renal Failure	1	0	3 - 98	1	100	3 - 98
Severe Acute Heart Disease	35	63	23 - 55	44	39	26 - 55
Severe Chronic Heart Disease	51	29	10 - 36	48	33	12 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	74	4	0 - 16	66	3	0 - 17
Gynecologic Disease	6	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	109	3	1 - 10	102	1	2 - 8
Musculoskeletal/Skin Conditions	72	3	0 - 20	71	1	0 - 13
Neuropsychiatric/Sensory Disease	26	4	0 - 56	29	0	0 - 33
Urologic Disease	23	0	0 - 74	40	0	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	113
Occupancy Rate (%):	38
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	31
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	80
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LA PORTE HOSP

STATE AND MADISON AVE
LA PORTE, IN 46350

Medicare Hospital Provider Number: 150006

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,310	12	10 - 14	1,257	11	10 - 15
Cancer	28	32	21 - 57	32	34	18 - 53
Cerebrovascular Accidents	46	35	13 - 41	58	21	16 - 39
Gastrointestinal Catastrophes	24	42	20 - 61	12	33	14 - 66
Infectious Disease	22	36	18 - 59	30	40	20 - 57
Metabolic/Electrolyte Disorders	28	21	13 - 48	24	21	9 - 47
Pulmonary Disease	87	21	14 - 34	76	28	14 - 37
Renal Failure	5	40	9 - 83	1	0	0 - 98
Severe Acute Heart Disease	60	40	26 - 52	51	41	27 - 55
Severe Chronic Heart Disease	65	25	14 - 36	77	16	14 - 32
Severe Trauma	7	43	7 - 72	1	0	0 - 99
Gastrointestinal Disease	141	2	1 - 8	87	3	0 - 13
Gynecologic Disease	10	0	0 -100	20	0	0 - 97
Low-Risk Heart Disease	189	3	1 - 7	142	3	1 - 8
Musculoskeletal/Skin Conditions	101	2	1 - 10	85	5	0 - 22
Neuropsychiatric/Sensory Disease	28	0	0 - 71	48	0	0 - 13
Urologic Disease	61	3	0 - 30	73	1	0 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	227
Occupancy Rate (%):	55
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	69
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	118
Licensed Practical Nurses:	16

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

La PORTE HOSPITAL
P.O. Box 250 LaPorte, Indiana 46350-0250 Telephone 219-326-1234

October 24, 1988

Health Standards and Quality Bureau, HCFA
ATTN: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

In response to the Medicare Mortality Data we received, we have verified the accuracy of the data base and noted that in those patients we were able to verify the cause of death, the cause of death did not appear to be related to the patient's diagnosis in the previous admission. We also noted that several of the deaths did not occur in La Porte Hospital.

Although we were within the range for the predicted mortality in all diagnostic categories, we feel it is significant to note that the data only indicates the statistical relationship between the Medicare admission and the death, but does not address the cause and effect of the death which can only be determined by the review of the patient's medical record.

We appreciate the opportunity to review and respond to the data and plan to utilize the information in our ongoing hospital quality assurance program.

Sincerely,

Wendell H. Finkbeiner

Wendell H. Finkbeiner
Senior Vice President
Finance

WHF:cp

LAFAYETTE HOME HOSP INC

2400 SOUTH ST
LAFAYETTE, IN 47902

Medicare Hospital Provider Number: 150109

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,771	13	9 - 13	1,843	12	9 - 14
Cancer	59	32	22 - 49	41	29	25 - 55
Cerebrovascular Accidents	76	28	16 - 37	68	31	16 - 39
Gastrointestinal Catastrophes	23	39	18 - 59	15	60	13 - 62
Infectious Disease	27	52	16 - 55	35	37	17 - 52
Metabolic/Electrolyte Disorders	31	16	8 - 41	30	20	8 - 43
Pulmonary Disease	81	22	15 - 36	96	25	17 - 38
Renal Failure	10	30	15 - 76	11	36	13 - 75
Severe Acute Heart Disease	52	50	27 - 55	73	48	28 - 52
Severe Chronic Heart Disease	85	33	14 - 35	78	14	17 - 35
Severe Trauma	10	40	9 - 67	4	25	2 - 82
Gastrointestinal Disease	152	3	1 - 9	146	3	1 - 9
Gynecologic Disease	21	0	0 -100	28	0	0 -100
Low-Risk Heart Disease	155	2	1 - 7	192	4	1 - 8
Musculoskeletal/Skin Conditions	154	3	0 - 9	199	2	0 - 6
Neuropsychiatric/Sensory Disease	82	2	0 - 17	85	4	0 - 18
Urologic Disease	116	0	0 - 6	94	1	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	377
Occupancy Rate (%):	59
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	181
Percent of Physicians Who Are Board Certified Specialists:	74
Interns and Residents:	0
Registered Nurses:	214
Licensed Practical Nurses:	20

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

LAGRANGE HOSPITAL

RR5 BOX 79
LAGRANGE, IN 46761

Medicare Hospital Provider Number: 150096

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	303	15	8 - 16	311	18	7 - 17
Cancer	2	50	4 - 93	2	100	7 - 91
Cerebrovascular Accidents	12	33	7 - 59	13	31	10 - 59
Gastrointestinal Catastrophes	1	0	0 - 99	2	50	2 - 92
Infectious Disease	5	20	5 - 74	1	0	0 - 98
Metabolic/Electrolyte Disorders	6	0	7 - 60	7	29	3 - 70
Pulmonary Disease	41	17	10 - 36	32	38	8 - 43
Renal Failure	2	100	3 - 89	3	67	7 - 89
Severe Acute Heart Disease	7	57	14 - 77	11	55	15 - 69
Severe Chronic Heart Disease	22	32	7 - 47	26	35	9 - 46
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	38	5	0 - 40	30	7	0 - 71
Gynecologic Disease	2	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	32	3	0 - 31	30	7	0 - 57
Musculoskeletal/Skin Conditions	22	0	0 - 88	25	8	0 - 82
Neuropsychiatric/Sensory Disease	0	-	-	9	0	0 -100
Urologic Disease	11	0	0 -100	13	0	0 - 93

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	62
Occupancy Rate (%):	39
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Hospital ID: 150096

Vencare, Inc.
LaGrange Hospital
Route 5, Box 79
LaGrange, IN 46761
(219) 463-2143

Vencare
Challenging the horizons of healthcare.

October 24, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert,

This letter is in response to the material entitled Medicare Hospital Mortality Information (1987).

Information under Hospital Characteristics is incorrect, see attached reference. The information should be as follows:

Beds (#)	should be 62, not 48
Occupancy rate (%)	is correct, 34%
Staffing:	
Total number of physicians	should be 9, not 45
Percent of physicians who are board certified specialists	should be 11, not 44

These are the only corrections we wish to address, if you should have further questions, please feel free to contact me.

Sincerely,

Sharon Honaker

Sharon Honaker, RN
Quality Assurance Coordinator

MAJOR HOSPITAL

150 WEST WASHINGTON STREET
SHELBYVILLE, IN 46176

Medicare Hospital Provider Number: 150097

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	704	13	9 - 16	742	14	10 - 16
Cancer	7	57	14 - 78	12	50	13 - 66
Cerebrovascular Accidents	36	33	14 - 45	33	24	16 - 47
Gastrointestinal Catastrophes	8	63	19 - 79	8	50	11 - 73
Infectious Disease	3	33	3 - 86	6	17	9 - 71
Metabolic/Electrolyte Disorders	18	11	10 - 47	34	21	9 - 42
Pulmonary Disease	68	32	16 - 41	72	32	15 - 39
Renal Failure	3	100	17 - 93	0	-	-
Severe Acute Heart Disease	20	40	22 - 63	27	48	21 - 58
Severe Chronic Heart Disease	29	28	9 - 43	36	14	15 - 40
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	37	0	0 - 18	46	2	0 - 21
Gynecologic Disease	9	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	107	2	1 - 9	98	3	1 - 11
Musculoskeletal/Skin Conditions	43	2	0 - 21	46	4	0 - 48
Neuropsychiatric/Sensory Disease	24	0	0 - 44	28	7	0 - 77
Urologic Disease	30	0	0 - 28	31	3	0 - 35

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	89
Occupancy Rate (%):	51
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	41
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	67
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MARGARET MARY COMMUNITY HOSPITAL

321 MITCHEL AVENUE
BATESVILLE, IN 47006

Medicare Hospital Provider Number: 150122

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	407	12	10 - 17	395	17	11 - 19
Cancer	7	71	15 - 77	7	57	9 - 73
Cerebrovascular Accidents	17	29	10 - 53	30	43	17 - 52
Gastrointestinal Catastrophes	3	67	8 - 89	2	0	1 - 90
Infectious Disease	7	29	14 - 76	4	0	13 - 77
Metabolic/Electrolyte Disorders	10	30	11 - 66	9	11	9 - 59
Pulmonary Disease	48	27	15 - 42	40	32	16 - 46
Renal Failure	0	-	-	8	75	19 - 84
Severe Acute Heart Disease	16	19	23 - 62	12	33	13 - 63
Severe Chronic Heart Disease	29	17	10 - 39	28	25	11 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	40	0	0 - 17	29	3	0 - 37
Gynecologic Disease	3	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	60	5	0 - 22	55	7	0 - 24
Musculoskeletal/Skin Conditions	16	0	0 - 82	16	6	0 - 99
Neuropsychiatric/Sensory Disease	11	0	0 - 81	16	0	0 - 83
Urologic Disease	14	0	0 - 91	9	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	109
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	10
Percent of Physicians Who Are Board Certified Specialists:	30
Interns and Residents:	0
Registered Nurses:	31
Licensed Practical Nurses:	9

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MARION GENERAL HOSPITAL

WABASH AT EUCLID AVENUE
MARION, IN 46952

Medicare Hospital Provider Number: 150011

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,035	12	9 - 14	2,161	12	10 - 14
Cancer	62	35	28 - 55	59	47	26 - 55
Cerebrovascular Accidents	76	30	19 - 41	87	33	19 - 40
Gastrointestinal Catastrophes	14	29	13 - 61	19	16	12 - 50
Infectious Disease	15	33	16 - 64	17	35	16 - 61
Metabolic/Electrolyte Disorders	44	25	11 - 42	54	19	15 - 42
Pulmonary Disease	132	25	17 - 35	143	27	19 - 37
Renal Failure	6	50	12 - 84	8	75	19 - 83
Severe Acute Heart Disease	70	56	26 - 51	74	46	26 - 50
Severe Chronic Heart Disease	99	24	15 - 33	120	27	17 - 35
Severe Trauma	2	50	3 - 92	3	0	1 - 81
Gastrointestinal Disease	186	4	1 - 8	207	4	1 - 8
Gynecologic Disease	30	0	0 -100	35	0	0 -100
Low-Risk Heart Disease	235	3	2 - 7	270	3	1 - 6
Musculoskeletal/Skin Conditions	189	3	1 - 7	189	2	1 - 6
Neuropsychiatric/Sensory Disease	32	6	0 - 56	31	0	0 - 49
Urologic Disease	106	2	0 - 16	120	2	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	275
Occupancy Rate (%):	51
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	82
Percent of Physicians Who Are Board Certified Specialists:	60
Interns and Residents:	0
Registered Nurses:	192
Licensed Practical Nurses:	96

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MARY SHERMAN HOSPITAL

320 NORTH SECTION STREET
SULLIVAN, IN 47882

Medicare Hospital Provider Number: 150013

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	511	14	9 - 16	522	14	10 - 17
Cancer	3	67	10 - 91	7	86	15 - 71
Cerebrovascular Accidents	32	28	12 - 44	31	19	14 - 44
Gastrointestinal Catastrophes	1	0	3 - 99	3	33	3 - 86
Infectious Disease	4	0	9 - 73	9	22	10 - 65
Metabolic/Electrolyte Disorders	6	0	1 - 68	7	29	3 - 70
Pulmonary Disease	30	30	11 - 45	36	22	14 - 43
Renal Failure	4	25	11 - 87	3	67	7 - 89
Severe Acute Heart Disease	26	50	20 - 58	15	47	18 - 65
Severe Chronic Heart Disease	52	27	14 - 39	52	33	13 - 40
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	55	2	0 - 16	47	11	0 - 31
Gynecologic Disease	3	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	77	3	1 - 12	83	2	1 - 11
Musculoskeletal/Skin Conditions	46	0	1 - 12	42	0	0 - 16
Neuropsychiatric/Sensory Disease	9	11	0 -100	11	0	0 - 99
Urologic Disease	10	10	0 - 99	23	4	0 - 95

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	72
Occupancy Rate (%):	36
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	7
Percent of Physicians Who Are Board Certified Specialists:	14
Interns and Residents:	0
Registered Nurses:	36
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MCCRAY MEMORIAL HOSPITAL

PO BOX 249
KENDALLVILLE, IN 46755

Medicare Hospital Provider Number: 150073

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	460	12	8 - 15	456	13	9 - 16
Cancer	7	43	13 - 77	13	69	22 - 70
Cerebrovascular Accidents	22	23	14 - 50	21	29	10 - 49
Gastrointestinal Catastrophes	0	-	-	2	100	8 - 92
Infectious Disease	3	0	3 - 79	4	25	5 - 80
Metabolic/Electrolyte Disorders	15	40	7 - 57	10	20	2 - 61
Pulmonary Disease	47	9	9 - 29	35	11	12 - 37
Renal Failure	0	-	-	3	0	9 - 85
Severe Acute Heart Disease	13	31	19 - 67	16	56	21 - 67
Severe Chronic Heart Disease	38	24	12 - 40	37	27	10 - 40
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	38	3	1 - 21	49	4	0 - 31
Gynecologic Disease	8	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	55	5	0 - 24	63	0	1 - 8
Musculoskeletal/Skin Conditions	36	6	0 - 59	17	0	0 - 58
Neuropsychiatric/Sensory Disease	28	0	0 - 94	6	0	0 -100
Urologic Disease	17	6	0 - 57	22	0	0 - 91

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	66
Occupancy Rate (%):	44
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MEMORIAL HOSP

615 N MICHIGAN ST
SOUTH BEND, IN 46601

Medicare Hospital Provider Number: 150058

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,153	11	9 - 13	3,190	11	9 - 13
Cancer	135	36	29 - 50	128	38	30 - 52
Cerebrovascular Accidents	101	33	17 - 37	89	29	17 - 37
Gastrointestinal Catastrophes	20	30	14 - 57	19	21	15 - 55
Infectious Disease	41	29	21 - 52	26	46	20 - 59
Metabolic/Electrolyte Disorders	54	41	17 - 48	60	33	14 - 43
Pulmonary Disease	128	23	15 - 33	123	22	17 - 36
Renal Failure	2	100	2 - 89	8	13	14 - 74
Severe Acute Heart Disease	124	34	26 - 45	126	38	28 - 47
Severe Chronic Heart Disease	173	17	16 - 29	156	20	16 - 31
Severe Trauma	3	100	4 - 79	4	25	3 - 80
Gastrointestinal Disease	233	2	1 - 6	211	3	1 - 7
Gynecologic Disease	37	0	0 -100	37	0	0 - 99
Low-Risk Heart Disease	498	3	2 - 5	488	4	2 - 6
Musculoskeletal/Skin Conditions	293	3	0 - 6	302	1	1 - 5
Neuropsychiatric/Sensory Disease	69	0	0 - 10	176	2	0 - 7
Urologic Disease	111	3	0 - 14	85	4	0 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	475
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	333
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	18
Registered Nurses:	466
Licensed Practical Nurses:	37

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MEMORIAL HOSPITAL
OF SOUTH BEND
Excellence

October 19, 1988

Dr. William L. Roper
Administrator
Health Care Financing Administration
Health Standards and Quality Bureau
P.O. Box 26684
Baltimore, Maryland 21207

Dear Dr. Roper:

We are writing to you in response to the Health Care Financing Administration Medicare mortality information which was sent to Memorial Hospital of South Bend on September 15, 1988. Thank you for the opportunity to review and comment on the data.

Attached are several comments specifically detailing factors the public should consider in interpreting the HCFA data for Memorial Hospital of South Bend. However, as you know, the information on its own is not a complete measure of the quality of care at Memorial Hospital.

We again appreciate your methodology in allowing us to analyze the Medicare mortality information before it is displayed to the general public, and hope that the comments we are returning to you provide additional insight into the interpretation of the data for Memorial Hospital of South Bend.

Sincerely,

Bruce Bancroft, Chairman
Board of Trustees Committee
on Quality Assessment

James Grainger, M.D.
Chairman, Medical Staff
Quality Assessment Committee

/mm

Attachments

MEMORIAL HOSPITAL OF SOUTH BEND

Comments Regarding the Health Care Financing Administration Mortality Rates

Memorial Hospital of South Bend has actual mortality rates for 14 diagnostic categories that fall within the range of predicted mortality rates set by the Health Care Financing Administration. In addition, two diagnostic categories had actual mortality rates falling outside the predicted range. Following are several comments specifically detailing factors the public should consider in interpreting this information for Memorial Hospital of South Bend:

1. The Health Care Financing Administration (HCFA) has reported to hospitals across the nation that, "the information on its own is not a complete measure of the quality of care at any individual hospital." In addition, HCFA claims that until they have "developed additional statistical measures to deal with complex issues such as severity of illness, they cannot and do not recommend the use of the information by itself to make judgements about quality of care in an individual hospital or to make comparisons among hospitals."

   In addition, the model used by HCFA to predict hospital mortality rates fails to consider the wide range of factors with significant impact on mortality. Examples include, but are not limited to, the patient's general health status, the stage or acuity of the patient's illness, patient's psychological condition and family support.

2. Memorial Hospital of South Bend feels it is more appropriate to monitor all inpatient deaths on an individual basis. In doing so, we take into consideration a thorough review of the information contained within a patient's medical record. This allows Memorial to consider all information in assessing the timeliness and appropriateness of care provided.

3. The medical mortality rates reported for certain diagnostic categories are influenced by the fact that Memorial Hospital of South Bend is a regional referral center for cancer, heart, trauma and rehabilitation services. Therefore, Memorial Hospital offers services that attract patients with a higher than average expected mortality. The majority of diagnostic categories reported by HCFA fall into these specialty areas.

4. The use of 30 day post admission mortality rates results in the attribution to the Hospital of deaths that are unrelated to the condition of the patient. Also, HCFA does not take into account the cause of death. Patients are arbitrarily placed in categories that relate to their last hospital stay, not necessarily reflecting their true cause of death.

5. The HCFA data is not an accurate representation of the mortality rates the general population may expect at Memorial Hospital of South Bend. HCFA calculates mortality rates based upon Medicare patients only. The average age of the Medicare patients at Memorial was 77 years old. Persons who qualify for Medicare tend to incur more frequent medical problems and require more health care services than other segments of the population. Because of this, their mortality rate is significantly higher than other population segments.

6. HCFA only considers the last Medicare admission to a hospital prior to death. Therefore, prior admissions to a hospital which resulted in something other than death as an outcome are not reflected in the mortality rate.

7. In general, the deaths at Memorial Hospital reported by HCFA were the "expected outcome" at the time the patients were admitted or discharged. In addition, review of the categories falling outside of the predicted ranges indicated that in each case the disease state and/or the severity of injury was such that death was the "expected outcome." In the majority of these five cases, aggressive treatment was not taken due to patient and family wishes not to prolong the dying process.

8. The AHA hospital data was reported incorrectly for 1986. The data should be revised accordingly:

Beds: 475
Occupancy Rate (%): 67
Ownership/Control: private, non-profit
Total Number of Physicians: 312
Board Certified Specialists: not available
Interns and Residents per bed: .09
Registered Nurses per bed: 1.08
Licensed Practical Nurses per bed: .08

MEMORIAL HOSP

1101 MICHIGAN AV
LOGANSPORT, IN 46947

Medicare Hospital Provider Number: 150072

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	805	14	9 - 15	875	14	8 - 14
Cancer	23	39	22 - 62	16	63	19 - 65
Cerebrovascular Accidents	48	40	12 - 40	25	32	12 - 48
Gastrointestinal Catastrophes	4	25	4 - 80	4	50	5 - 82
Infectious Disease	9	44	9 - 69	10	40	12 - 69
Metabolic/Electrolyte Disorders	4	100	8 - 73	3	0	0 - 90
Pulmonary Disease	55	15	11 - 33	46	22	11 - 38
Renal Failure	3	67	9 - 91	4	25	13 - 89
Severe Acute Heart Disease	39	38	22 - 53	50	50	22 - 51
Severe Chronic Heart Disease	47	23	9 - 35	52	27	9 - 35
Severe Trauma	2	0	1 - 90	0	-	-
Gastrointestinal Disease	80	0	1 - 7	82	6	0 - 22
Gynecologic Disease	12	0	0 -100	27	0	0 -100
Low-Risk Heart Disease	73	3	1 - 12	94	5	0 - 16
Musculoskeletal/Skin Conditions	66	2	0 - 18	86	0	0 - 7
Neuropsychiatric/Sensory Disease	10	20	0 -100	8	0	0 -100
Urologic Disease	30	3	0 - 40	38	8	0 - 44

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	125
Occupancy Rate (%):	34
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	39
Percent of Physicians Who Are Board Certified Specialists:	74
Interns and Residents:	0
Registered Nurses:	61
Licensed Practical Nurses:	18

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COMMENTS ON THE HCFA MORTALITY DATA

MEMORIAL HOSPITAL, LOGANSPORT, INDIANA

The data used by HCFA indicate that a total of 805 Medicare patients were admitted to Memorial Hospital in 1987. Of these, 505 cases fall within the 16 major diagnostic categories. Of those cases within the major diagnostic categories, 79 died within 30 days of admission and 29 died after discharge. Our own records indicate that 1,172 Medicare admissions occurred in 1987. Presumably the discrepancy reflects multiple admissions of individual beneficiaries to different hospitals. We have no way of verifying whether the number of Medicare patients treated at Memorial Hospital is correct. It is impossible to determine a percentage of the 29 patients dying after discharge, who were in fact alive, as information concerning death after discharge is not included in the patient's medical record.

Before reviewing the results of the HCFA study, it is important to note that there are many concerns over the method used to determine predicted mortality rates. No matter how sophisticated the methods used by HCFA to develop the predicted mortality rates might seem, the predicted rates are still nothing more than averages. It would be more accurate to refer to the "predicted mortality rate" as an "adjusted average mortality rate." The statistical methods used to predict mortality rates are intended only to say whether it is likely that the hospital's mortality rate differs from the average. William L. Roper, M.D., HCFA Administrator, states, "We cannot and do not recommend the use of the information by itself to make judgments about the quality of care in an individual hospital or to make comparisons among hospitals." Therefore, one should realize that the HCFA mortality data is not designed to and cannot say why the rates differ or whether differences are good, bad, or indifferent. A mortality rate that is higher or lower than a predicted rate is not an indication of the quality of care provided, it is merely a question.

The statistical model developed by HCFA measures the relationship between a limited number of patient characteristics and the risk of death. The model does provide accurate and reliable estimates of the relationship between each of the five patient care characteristics included in the model and the risk of death. Whether these are the most significant factors influencing the risk of death is unknown, but the limited ability of these factors to explain differences in mortality rates between hospitals suggests they are not.

The reliability of the model is unknown but appears to be quite limited. That is, the model may accurately and reliably reflect the relationship between the small number of patient characteristics and the risk of death, but does not reliably predict the hospital mortality rates. The model fails to consider a wide range of factors with a significant impact on mortality. Examples include but are not limited to the patient's general health status, stage of the patient's illness, the patient's psychological condition, and family support. The second and more serious limitation of the model is that it has not been validated. As noted above, deviations from the predicted mortality rate could indicate some problem with the quality of care in that hospital, but it could also reflect an exclusion from the model of significant factors influencing the risk of death. Whether the hospitals whose actual mortality rates are outside a predicted range are more or less likely to provide higher

or lower quality care is unknown. Statistical analysis of mortality rates can do no more than screen for further review. Quality judgments can only be made after individual case review.

In all but one diagnostic category, Memorial Hospital's actual mortality rate falls within the range of the predicted mortality rate. For the one exception, it is important to note that there was a very small sample size of only four cases in 1987. In all four cases, hospital admissions were the result of attempts to stabilize conditions of dehydration or of an unresponsive patient. However, in all cases, the patients' principle diagnosis was secondary to either advanced carcinoma, congestive heart failure, or other progressive deterioration of systems. All of the deaths occurring at Memorial are reviewed through a comprehensive peer review process. After such review, all of the cases were found to have received satisfactory medical attention with death the result of advanced illness or disease.

Differences between actual and predicted mortality rates are not an indicator of quality of care differences. There are three reasons that a hospital's actual mortality rate will differ from the "average" or "predicted" rate: simple chance, differences in the kinds of patients treated, and differences in the treatment provided. When the actual mortality rate is outside the range of the predicted rate, the implication is that the difference between actual predicted rates is not likely to be due to chance. It may be due to chance, but it is likely that there is a real difference. In the case of the diagnostic category where Memorial exceeds the predicted mortality rate, it should be attributed to the severity of illness and other patient characteristics.

In comparing actual mortality rates and predicted mortality rates from 1987 to 1986, there is significant variation in several of the diagnostic categories. The fact that this variation exists between actual predicted rates simply strengthens the case for concluding that something is not average about the hospital. Repeated differences do not indicate anything about the quality of care provided by the hospital. If the hospital's mortality rate is attributable to the types of patients it treats, then a difference between actual predicted (or average) rates would be expected to occur year after year. Similarly if a difference in mortality rates is attributable to differences in treatment, then the relationship between actual and predicted mortality rates should be about the same in each year. Therefore, since there does seem to be significant variations from year to year in the predicted rates, one could conclude that the mortality rate is attributable to differences in the types of patients or the severity of illnesses of the patients it treats and not a significant difference in the treatment provided.

It is important to realize that Memorial Hospital has a comprehensive quality assurance program which is fully accredited by the Joint Commission on Accreditation of Healthcare Organizations and licensed by the State Board of Health. Staffed by two full time employees, the QA Program oversees chart review, problem identification and resolution, and other activities of all the services within Memorial. Medical staff clinical activities are thoroughly reviewed through the use of peer review and credentialing activities. Over 100 hours each month is spent on reviewing quality of care issues.

MEMORIAL HOSP

800 W 9TH ST
JASPER, IN 47546

Medicare Hospital Provider Number: 150115

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	824	12	9 - 14	717	12	10 - 16
Cancer	23	57	26 - 66	21	62	29 - 70
Cerebrovascular Accidents	18	33	9 - 52	27	41	11 - 48
Gastrointestinal Catastrophes	3	33	3 - 86	8	25	9 - 68
Infectious Disease	3	0	9 - 81	1	100	3 - 98
Metabolic/Electrolyte Disorders	31	19	13 - 46	31	23	10 - 45
Pulmonary Disease	55	25	13 - 38	45	20	13 - 39
Renal Failure	3	33	6 - 89	5	40	15 - 89
Severe Acute Heart Disease	22	55	21 - 62	30	23	24 - 55
Severe Chronic Heart Disease	59	39	14 - 39	65	23	13 - 35
Severe Trauma	1	0	1 - 97	1	0	0 - 98
Gastrointestinal Disease	75	4	0 - 19	44	0	0 - 14
Gynecologic Disease	19	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	76	3	2 - 12	63	3	0 - 18
Musculoskeletal/Skin Conditions	107	1	1 - 8	92	0	0 - 7
Neuropsychiatric/Sensory Disease	23	0	0 - 69	22	0	0 - 62
Urologic Disease	31	0	0 - 27	29	3	0 - 85

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	131
Occupancy Rate (%):	43
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	34
Percent of Physicians Who Are Board Certified Specialists:	47
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MEMORIAL HOSPITAL
and Health Care Center

800 W. 9th Street • Jasper, Indiana 47546 • (812) 482-2345

September 26, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207
Attn: Sandra Kappert

Dear Ms. Kappert:

I am enclosing a copy of the Medicare Hospital Mortality Information which has been changed to reflect a change in bed and specialty services. If you have any further questions please feel free to contact me.

Very truly yours,

Herman A. Kohlman

Herman A. Kohlman
President

/cb

HAK197LTR

MEMORIAL HOSP OF MICHIGAN CITY

5TH PINE STS
MICHIGAN CITY, IN 46360

Medicare Hospital Provider Number: 150077

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	292	11	8 - 16	275	16	9 - 18
Cancer	5	80	11 - 78	9	67	15 - 72
Cerebrovascular Accidents	19	21	11 - 49	9	56	8 - 67
Gastrointestinal Catastrophes	2	50	2 - 92	2	50	1 - 92
Infectious Disease	7	43	9 - 73	7	29	10 - 72
Metabolic/Electrolyte Disorders	5	20	1 - 82	6	17	6 - 70
Pulmonary Disease	20	15	11 - 45	19	26	11 - 51
Renal Failure	2	50	4 - 93	1	100	3 - 98
Severe Acute Heart Disease	9	33	12 - 69	6	33	12 - 78
Severe Chronic Heart Disease	15	20	7 - 50	17	24	6 - 48
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	24	0	0 - 62	17	6	0 - 99
Gynecologic Disease	3	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	25	12	0 - 84	27	7	0 - 65
Musculoskeletal/Skin Conditions	17	0	0 - 69	20	5	0 - 99
Neuropsychiatric/Sensory Disease	17	0	0 - 42	6	17	0 -100
Urologic Disease	4	0	0 -100	13	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	102
Occupancy Rate (%):	54
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	115
Percent of Physicians Who Are Board Certified Specialists:	49
Interns and Residents:	0
Registered Nurses:	66
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MEMORIAL HOSPITAL OF MICHIGAN CITY

Fifth and Pine Streets Michigan City, Indiana 46360 (219) 879-0202
(219) 326-7427

October 20, 1988

William M. Roper, M.D. Medicare Provider #15-0077
Administrator
Health Care Financing Administration
Health Standards & Quality Bureau
Hospital Mortality Information
P. O. Box 26684
Baltimore, Maryland 21207

Dear Dr. Roper:

Thank you for the opportunity to provide input and respond to the release of data on hospital mortality rates for 1987.

Memorial Hospital of Michigan City is a 102 bed acute care facility whose case mix includes patients with major medical and surgical illnesses. We offer comprehensive services in Cardiology, Obstetrics and Gynecology, Chemotherapy, Emergency and Intensive Care, as well as providing a full array of general, acute care services.

The Quality Assurance Program at Memorial Hospital of Michigan City conducts an ongoing review of patients treated at this facility regarding medical management and overall care. This comprehensive program includes review of all deaths.

Hospitals are monitored by several outside agencies to assure that certain standards of patient care are maintained. Included are the Joint Commission on Accreditation of Health Care Organizations, the Indiana State Board of Health, and peer review organizations. Memorial Hospital of Michigan City continues to be fully accredited by the Joint Commission as it has been since the Commission's inception. We are licensed and annually inspected by the Indiana State Board of Health to insure full compliance with all standards. Likewise the Federal Government through the organization Peer Review, monitors the care provided for every Medicare patient treated in our hospital.

Our hospital's specific mortality data reported by

HCFA has been fully reviewed by the President of the Medical Staff, the Physician Chairman of the Utilization Review Committee, Physician Chairman of Quality Assurance, Directors of Utilization Review, Quality Assurance, and Medical Records. Statistics indicate that we fall within the predicted range of mortality rates in all areas reported with the exception of the category of cancer. Based on the data released by HCFA, we reviewed the medical records of all Medicare patients who died within 30 days of admission to Memorial Hospital.

Review of the deaths due to cancer indicates that there was a significant spread of their cancer at the time of admission. Many patients suffered from other serious medical diseases which limited their ability to recover from their disease.

In an ongoing effort to assure quality of care, we welcome this information and thank you for the opportunity to respond.

Sincerely,

Norman D. Steider

Norman D. Steider,
Hospital President

David W. Miller

David W. Miller, M.D.,
Chief of Staff

MERCY HOSPITAL INC

1331 SOUTH A STREET
ELWOOD, IN 46036

Medicare Hospital Provider Number: 150094

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	399	12	8 - 16	425	17	11 - 19
Cancer	6	67	13 - 79	10	60	18 - 74
Cerebrovascular Accidents	19	16	13 - 48	33	33	14 - 46
Gastrointestinal Catastrophes	1	0	3 - 99	2	50	2 - 92
Infectious Disease	8	0	18 - 60	6	0	17 - 68
Metabolic/Electrolyte Disorders	7	57	2 - 73	10	10	13 - 59
Pulmonary Disease	20	35	10 - 52	38	34	13 - 44
Renal Failure	4	75	8 - 84	1	100	1 - 97
Severe Acute Heart Disease	12	25	18 - 66	23	61	22 - 61
Severe Chronic Heart Disease	32	31	9 - 42	35	17	15 - 42
Severe Trauma	1	0	0 - 97	1	0	2 - 97
Gastrointestinal Disease	35	0	0 - 22	28	4	0 - 51
Gynecologic Disease	5	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	43	0	1 - 13	40	0	1 - 14
Musculoskeletal/Skin Conditions	31	0	0 - 25	28	0	0 - 41
Neuropsychiatric/Sensory Disease	12	0	0 - 88	8	13	0 -100
Urologic Disease	12	8	0 - 78	15	0	0 - 70

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	49
Occupancy Rate (%):	53
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	19
Percent of Physicians Who Are Board Certified Specialists:	42
Interns and Residents:	0
Registered Nurses:	36
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Mercy Hospital

September 22, 1988

Ms. Sandra Kappert
Health Standards and Quality Bureau, HCFA
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

Mercy Hospital has conducted a review of the calendar year 1987 Mortality Rate. It should be noted that the mortality rate for this Hospital includes the Hospital's Swing Bed (skilled nursing unit) mortality data. As a result, the actual mortality rate is higher for this particular hospital. It should also be noted under hospital characteristics that the number of beds for Mercy Hospital is 49 rather than the 42 listed.

Sincerely,

James E. Baer

James E. Baer
Administrator

JEB:rav

METHODIST HOSP OF INDIANA INC

1701 NORTH SENATE BOULEVARD
INDIANAPOLIS, IN 46202

Medicare Hospital Provider Number: 150056

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	5,838	13	11 - 14	5,992	13	10 - 14
Cancer	303	43	34 - 52	284	42	33 - 51
Cerebrovascular Accidents	186	28	19 - 34	221	31	20 - 34
Gastrointestinal Catastrophes	73	40	22 - 50	48	42	19 - 52
Infectious Disease	69	28	24 - 50	58	43	25 - 55
Metabolic/Electrolyte Disorders	91	36	21 - 47	80	32	13 - 40
Pulmonary Disease	265	28	21 - 36	214	21	19 - 34
Renal Failure	62	18	7 - 53	78	18	11 - 57
Severe Acute Heart Disease	215	36	27 - 43	204	38	29 - 46
Severe Chronic Heart Disease	246	18	18 - 29	252	19	17 - 29
Severe Trauma	35	29	12 - 48	24	38	11 - 54
Gastrointestinal Disease	293	4	1 - 7	283	6	1 - 8
Gynecologic Disease	58	3	0 - 98	44	2	0 - 99
Low-Risk Heart Disease	709	4	2 - 6	653	4	2 - 6
Musculoskeletal/Skin Conditions	496	2	1 - 5	541	2	1 - 5
Neuropsychiatric/Sensory Disease	364	2	1 - 6	436	2	1 - 5
Urologic Disease	322	1	0 - 5	421	1	1 - 5

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	992
Occupancy Rate (%):	75
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	487
Percent of Physicians Who Are Board Certified Specialists:	80
Interns and Residents:	156
Registered Nurses:	847
Licensed Practical Nurses:	283

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	Yes

METHODIST HOSP SOUTH LAKE CAMPUS

8701 BROADWAY
MERRILLVILLE, IN 46410

Medicare Hospital Provider Number: 150132

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,122	12	10 - 14	1,966	14	10 - 15
Cancer	110	35	31 - 53	77	52	31 - 56
Cerebrovascular Accidents	67	31	16 - 39	86	34	17 - 38
Gastrointestinal Catastrophes	11	36	10 - 65	11	45	13 - 68
Infectious Disease	42	26	23 - 53	45	42	26 - 59
Metabolic/Electrolyte Disorders	31	45	15 - 53	38	29	16 - 49
Pulmonary Disease	69	20	15 - 37	92	33	17 - 39
Renal Failure	15	53	16 - 74	8	63	10 - 77
Severe Acute Heart Disease	70	29	26 - 49	58	43	25 - 51
Severe Chronic Heart Disease	133	18	15 - 30	129	23	16 - 32
Severe Trauma	3	33	3 - 86	3	0	3 - 79
Gastrointestinal Disease	148	5	1 - 11	132	3	1 - 9
Gynecologic Disease	23	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	350	3	1 - 6	340	4	1 - 6
Musculoskeletal/Skin Conditions	202	4	0 - 10	141	4	1 - 10
Neuropsychiatric/Sensory Disease	50	2	0 - 28	49	4	0 - 32
Urologic Disease	134	2	0 - 10	103	1	1 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	345
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	393
Licensed Practical Nurses:	46

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

THE METHODIST HOSPITALS

Northlake Campus
Corporate Office
600 Grant St.
Gary, IN 46402
(219) 886-4000

Southlake Campus
8701 Broadway
Merrillville, IN 46410
(219) 738-5500

Provider #15-0002 Provider #15-0132

October 20, 1988

William L. Roper, M.D.
Administrator
c/o Ms. Sandra Kappert
Department of Health and Human Services
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

The following comments are in response to your September 16, 1988 communication regarding the intended release of mortality rate data for 1987 and the recalculation of data for 1986.

The Methodist Hospitals serve as a regional referral center for communities throughout Northwest Indiana. A wide range of diagnostic and treatment capabilities attract physicians and their patients to the hospital.

All deaths included in the 1987 HCFA mortality analysis for the Northlake and Southlake Campuses have been verified as deaths of patients who had been hospitalized at the Methodist Hospitals. The hospital has a well-established quality assurance process which includes mortality review. All deaths are reviewed from a nursing and physician standpoint to evaluate the quality of patient care management.

It is significant that the leading causes of deaths listed are consistent with those of the nation and the state. The leading causes of death for the State of Indiana in 1986 (most recent data) were diseases of the heart (1), cancer (2) and cerebrovascular disease (3). In reviewing the Methodist Hospitals data, the leading causes of death are the same - consistent with both state and national data.

Our review of The Methodist Hospital medical records for those deaths included in the 1987 HCFA analysis found:

1. Over 75% of the patients had one or more co-existing medical conditions in addition to that condition which necessitated their hospitalization. This is a significant percentage and is consistent with the hospital's role as a regional referral center for cardiovascular disease, cancer, renal disease, pulmonary disease, etc.

2. More than 50% of the patients presented at the Emergency Room and were subsequently admitted to an acute care unit.

3. More than 90% of the patient admissions were classified as urgent or emergency admissions.

The hospital strives to meet the healthcare needs of the community with a spectrum of services for those who are ambulatory to those who are critically ill. The increasingly aging population of the Northwest Indiana communities allows us to serve a significant percentage of Medicare patients - 23.2% of all Lake County residents ages 65 or older.

Because the data presented for each hospital is hospital - specific and considers the specific patient population of the hospital and hospital services provided, it will be of little value to consumers to compare hospitals on the basis of the data presented. Mortality is but one of the many factors which enter into an assessment of hospital performance.

Until the measures to be used by consumers, hospitals and Peer Review Organizations for the determination of the presence or absence of quality care are defined, the assessment of quality from models currently in use is limited. Thus, Medicare recipients are encouraged to discuss the mortality data with their physicians for a better understanding of factors influencing quality of care rendered in a hospital setting.

Thank you for the opportunity to comment.

Sincerely yours,

John H. Betjemann
President

Veera Porapaiboon, M.D.
President, Medical Staff

JHB/VP/dg
0088G

MICHIANA COMMUNITY HOSPITAL INC

2515 EAST JEFFERSON BLVD
SOUTH BEND, IN 46615

Medicare Hospital Provider Number: 150099

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	634	13	8 - 14	595	12	8 - 14
Cancer	15	27	15 - 60	14	50	15 - 65
Cerebrovascular Accidents	24	21	12 - 46	18	17	11 - 48
Gastrointestinal Catastrophes	2	50	4 - 93	5	20	4 - 74
Infectious Disease	9	67	12 - 69	9	44	8 - 68
Metabolic/Electrolyte Disorders	31	6	8 - 35	33	9	7 - 35
Pulmonary Disease	30	43	10 - 46	35	14	10 - 37
Renal Failure	7	43	15 - 83	4	50	4 - 84
Severe Acute Heart Disease	23	52	19 - 59	13	54	13 - 63
Severe Chronic Heart Disease	35	31	9 - 41	43	16	12 - 36
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	37	3	0 - 36	45	4	0 - 27
Gynecologic Disease	18	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	55	9	0 - 33	56	2	1 - 13
Musculoskeletal/Skin Conditions	78	3	0 - 14	70	3	0 - 19
Neuropsychiatric/Sensory Disease	36	3	0 - 93	15	0	0 - 94
Urologic Disease	34	0	0 - 66	24	17	0 - 85

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	107
Occupancy Rate (%):	51
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	65
Percent of Physicians Who Are Board Certified Specialists:	37
Interns and Residents:	8
Registered Nurses:	78
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MORGAN CO MEM HOSP

2209 JOHN R WOODEN DR
MARTINSVILLE, IN 46151

Medicare Hospital Provider Number: 150038

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	813	13	11 - 17	815	13	11 - 17
Cancer	16	50	19 - 66	14	50	11 - 61
Cerebrovascular Accidents	30	13	15 - 41	44	34	15 - 44
Gastrointestinal Catastrophes	6	33	6 - 74	10	70	19 - 73
Infectious Disease	21	24	15 - 54	33	36	22 - 57
Metabolic/Electrolyte Disorders	6	50	4 - 75	8	13	2 - 62
Pulmonary Disease	90	24	16 - 37	68	19	16 - 38
Renal Failure	12	42	19 - 80	5	20	9 - 80
Severe Acute Heart Disease	38	53	29 - 61	36	53	29 - 61
Severe Chronic Heart Disease	40	25	14 - 42	39	10	16 - 37
Severe Trauma	3	33	2 - 87	1	0	0 - 98
Gastrointestinal Disease	71	0	1 - 8	64	9	0 - 29
Gynecologic Disease	11	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	80	2	1 - 11	84	1	2 - 9
Musculoskeletal/Skin Conditions	42	0	2 - 12	55	2	0 - 17
Neuropsychiatric/Sensory Disease	15	0	0 - 76	15	0	0 - 73
Urologic Disease	46	2	0 - 57	46	2	0 - 29

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	108
Occupancy Rate (%):	45
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	46
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	0
Registered Nurses:	43
Licensed Practical Nurses:	25

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

NORTH CLARK COMM HOSP

2200 MARKET ST
CHARLESTOWN, IN 47111

Medicare Hospital Provider Number: 150134

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	388	12	9 - 16	362	9	9 - 16
Cancer	7	43	9 - 73	6	17	17 - 78
Cerebrovascular Accidents	15	20	13 - 54	11	27	7 - 59
Gastrointestinal Catastrophes	2	100	1 - 90	1	0	0 - 97
Infectious Disease	6	33	8 - 75	3	0	1 - 82
Metabolic/Electrolyte Disorders	21	14	9 - 45	16	6	7 - 42
Pulmonary Disease	32	22	12 - 43	36	25	14 - 44
Renal Failure	3	33	9 - 91	1	0	0 - 98
Severe Acute Heart Disease	15	47	20 - 67	17	12	26 - 60
Severe Chronic Heart Disease	19	11	8 - 40	15	27	7 - 53
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	28	11	0 - 50	32	3	0 - 28
Gynecologic Disease	3	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	47	6	0 - 26	51	0	2 - 10
Musculoskeletal/Skin Conditions	27	0	0 - 30	22	5	0 - 73
Neuropsychiatric/Sensory Disease	14	0	0 -100	7	0	0 -100
Urologic Disease	12	0	0 - 98	18	0	0 - 95

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	96
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

NORTH
CLARK
COMMUNITY
HOSPITAL

Medicare Provider # 150134
October 19, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

North Clark Community Hospital has elected not to comment on the Medicare Hospital Mortality Information. However, there is one erroneous item which should be corrected before the information is published. Your information indicates that North Clark Community Hospital does not have a coronary care unit when in fact, the hospital does offer this special service. Thank you for your attention to this matter.

Sincerely,

Earl J. Tamar
Administrator

EJT/jaj
10/19/88

2200 Market Street
Charlestown, Indiana 47111
Telephone (812) 256-3301

An Affiliate of
HEALTHTRUST
INC. The Hospital Company

ORANGE COUNTY HOSPITAL

R.R. 3, BOX 74
PAOLI, IN 47454

Medicare Hospital Provider Number: 150071

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	337	15	10 - 19	376	16	12 - 20
Cancer	5	80	11 - 78	5	20	12 - 79
Cerebrovascular Accidents	13	31	7 - 57	11	36	7 - 61
Gastrointestinal Catastrophes	2	50	7 - 95	3	67	2 - 86
Infectious Disease	0	-	-	5	60	17 - 87
Metabolic/Electrolyte Disorders	5	80	6 - 75	6	0	3 - 60
Pulmonary Disease	64	16	16 - 37	72	33	18 - 42
Renal Failure	3	33	1 - 89	6	50	11 - 83
Severe Acute Heart Disease	15	33	19 - 65	21	33	25 - 65
Severe Chronic Heart Disease	22	23	9 - 46	21	14	10 - 43
Severe Trauma	2	50	1 - 92	0	-	-
Gastrointestinal Disease	35	14	0 - 67	19	16	1 - 49
Gynecologic Disease	3	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	27	0	1 - 20	35	0	1 - 15
Musculoskeletal/Skin Conditions	23	4	0 - 68	18	0	0 - 98
Neuropsychiatric/Sensory Disease	15	0	0 - 92	6	0	0 -100
Urologic Disease	9	0	0 - 77	16	0	0 - 96

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	52
Occupancy Rate (%):	35
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

OUR LADY OF MERCY HOSPITAL

U S HIGHWAY 30
DYER, IN 46311

Medicare Hospital Provider Number: 150090

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,015	12	10 - 15	983	11	11 - 16
Cancer	28	43	25 - 62	22	32	20 - 60
Cerebrovascular Accidents	28	21	13 - 44	39	23	16 - 44
Gastrointestinal Catastrophes	11	27	12 - 64	5	40	17 - 88
Infectious Disease	24	25	19 - 56	35	17	25 - 55
Metabolic/Electrolyte Disorders	32	19	11 - 43	30	30	13 - 49
Pulmonary Disease	85	32	18 - 40	66	23	15 - 38
Renal Failure	2	50	1 - 93	4	75	8 - 85
Severe Acute Heart Disease	36	44	25 - 57	34	41	26 - 59
Severe Chronic Heart Disease	47	32	11 - 39	48	17	12 - 35
Severe Trauma	4	25	5 - 81	3	67	2 - 87
Gastrointestinal Disease	65	5	0 - 28	64	3	0 - 16
Gynecologic Disease	7	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	139	3	1 - 8	128	5	1 - 11
Musculoskeletal/Skin Conditions	88	1	0 - 10	88	5	1 - 14
Neuropsychiatric/Sensory Disease	37	5	0 - 40	29	0	0 - 21
Urologic Disease	35	0	0 - 54	26	4	0 - 35

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	264
Occupancy Rate (%):	64
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	128
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	0
Registered Nurses:	164
Licensed Practical Nurses:	1

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Medicare Provider No. 150090

Our Lady of Mercy Hospital
U.S. Highway 30 Dyer, Indiana 46311-1799 (219) 865-2141

October 19, 1988

Health Standards and Quality Bureau, HCFA
William L. Roper, M.D., Administrator
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Md 21207

Attention: Mrs. Sandra Kappert

Dear Mr. Roper:

Thank you for providing Our Lady of Mercy Hospital with the opportunity to review and respond to the Medicare Hospital Mortality Information: 1987. We note that, as in 1986, the actual mortality rates for our organization are well within the HCFA ranges for predicted mortality. Our review of the case listings provided indicates that the data base is accurate for this time period.

We are concerned about the possibility that the general public may be confused by the fact that mortalities occurring up to 30 days after discharge are attributed to the last discharging hospital. Non-related and accidental deaths due to unforeseen circumstances at the time of discharge are not reflective of the clinical decisions and care rendered during hospitalization.

Although our facility is satisfied with the data profile, we feel that health care consumers should be cautioned against inferring conclusions about health care quality based upon this data. The relationship of a hospital admission to an occurrence of death cannot be assumed to be causal in nature. Only individual case information received by health care professionals can interpret the role of the hospital in either a positive or negative result.

The HCFA annual report of mortality information provides a helpful data source for our professional quality assurance programs. It provides a springboard for analysis, interpretation and effective peer review which may result in improvement of the care for all our patients.

Sincerely,

J. Donald Manchak
President and Chief

JDM:bb

PARKVIEW MEMORIAL HOSPITAL INC

2200 RANDALIA DRIVE
FORT WAYNE, IN 46805

Medicare Hospital Provider Number: 150021

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,251	11	9 - 12	4,359	11	9 - 13
Cancer	175	37	29 - 48	205	35	30 - 50
Cerebrovascular Accidents	136	21	17 - 32	160	27	19 - 35
Gastrointestinal Catastrophes	25	40	17 - 58	36	28	17 - 51
Infectious Disease	28	25	22 - 57	32	41	22 - 59
Metabolic/Electrolyte Disorders	52	15	16 - 43	40	25	15 - 47
Pulmonary Disease	134	26	15 - 33	170	26	17 - 34
Renal Failure	12	50	17 - 78	10	50	19 - 83
Severe Acute Heart Disease	174	36	28 - 45	170	38	28 - 45
Severe Chronic Heart Disease	193	28	17 - 31	182	28	17 - 32
Severe Trauma	6	17	6 - 70	6	50	4 - 75
Gastrointestinal Disease	278	5	1 - 8	302	3	1 - 6
Gynecologic Disease	36	0	0 -100	35	0	0 -100
Low-Risk Heart Disease	532	5	2 - 6	531	3	2 - 5
Musculoskeletal/Skin Conditions	659	2	1 - 4	654	2	1 - 4
Neuropsychiatric/Sensory Disease	119	3	0 - 12	116	3	0 - 12
Urologic Disease	193	2	0 - 7	173	1	0 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

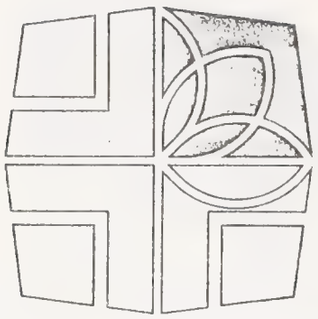
Total Beds (#):	641
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	240
Percent of Physicians Who Are Board Certified Specialists:	85
Interns and Residents:	0
Registered Nurses:	522
Licensed Practical Nurses:	141

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No



PARKVIEW

Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, MD 21207

October 21, 1988

Subject: Medicare Mortality Comments
Medicare Provider No: 150021

Dear Ms. Kappert:

Parkview Memorial Hospital has reviewed the HCFA mortality information regarding Medicare patients treated in 1987. The following reflects Parkview's response for publication. One correction regarding Parkview's Hospital Characteristics pertains to an error in the number of beds. The HCFA information reports 305 beds for 1986. Parkview operates 656 beds.

Comments For Publication:

Of the 16 diagnostic categories reported in the HCFA data, Parkview mortality percentages fall consistently within the range of predicted mortality for both 1986 and 1987.

The HCFA data does not take into account patients initially treated at surrounding health care facilities and then transferred to Parkview. Parkview Memorial Hospital is a regional referral center accepting acutely-ill patients. Thirty-two percent (32%) of the cases in the HCFA analysis were transfer patients from outlying health care facilities.

The 1987 data reported by HCFA indicates a total of 466 Medicare patients admitted to Parkview died within 30 days of their last admission. Of these, the HCFA data identified 361 died while still a patient at Parkview and 105 died after discharge.

Review of Parkview data was performed to verify these statistics. It is not possible to determine the accuracy of the HCFA information regarding patients who presumably died after discharge. Information concerning cause of death after discharge is not available to Parkview and very likely would be unrelated to the reason that the patient was initially hospitalized.

Statistical mortality rates cannot measure the quality of care a facility provides. Variations in the actual mortality rate from year to year are monitored at Parkview and used to identify the need for in-depth review of potential patterns or trends. Clinical review of all deaths is consistently performed at Parkview Memorial Hospital by a physician peer review process.

Sincerely,

David S. Ridderheim
Executive Vice President

amt\2-medic.let

PERRY CO MEM HOSP

1 HOSPITAL RD
TELL CITY, IN 47586

Medicare Hospital Provider Number: 150070

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	315	19	11 - 20	277	15	11 - 20
Cancer	6	67	19 - 84	3	67	4 - 86
Cerebrovascular Accidents	21	48	13 - 54	19	26	14 - 54
Gastrointestinal Catastrophes	2	100	1 - 92	2	50	1 - 93
Infectious Disease	7	43	11 - 75	6	33	13 - 79
Metabolic/Electrolyte Disorders	24	8	10 - 41	8	13	5 - 60
Pulmonary Disease	33	15	12 - 39	30	30	11 - 45
Renal Failure	3	67	13 - 97	6	33	12 - 83
Severe Acute Heart Disease	14	64	16 - 64	12	42	17 - 69
Severe Chronic Heart Disease	16	19	10 - 50	16	31	10 - 54
Severe Trauma	0	-	-	1	0	2 - 98
Gastrointestinal Disease	19	5	0 - 84	25	4	0 - 69
Gynecologic Disease	4	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	41	2	0 - 25	32	6	0 - 45
Musculoskeletal/Skin Conditions	21	5	0 - 58	15	0	0 - 75
Neuropsychiatric/Sensory Disease	1	0	0 -100	5	0	0 -100
Urologic Disease	6	0	0 -100	13	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	55
Occupancy Rate (%):	21
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	9
Percent of Physicians Who Are Board Certified Specialists:	44
Interns and Residents:	0
Registered Nurses:	29
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Perry County
Memorial Hospital

#1 Hospital Road
Tell City, IN. 47586
Telephone (812) 547-7011

Bradford W. Dykes
Administrator/Chief Executive Officer

October 13, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

The 1987 mortality rates and information you sent specifically for this facility has been reviewed by the medical staff and administration. It is noted that statistics for this facility were within the ranges of predicted mortality rates for all but one of the diagnostic categories listed. Also, under Specialty Services, response to coronary care unit should be yes rather than no.

Your letter states that "HCFA will stress, when released, that the information itself is not a complete measure of the quality of care at an individual hospital." We disagree. The information we received is statistical in nature, and we feel, is no measure of quality of care. The statistics tell how many patients were discharged from the facility, and the mortality rate. Those numbers do not tell the severity of the patients' illness, or how many were ill or "expected" to die. The numbers do not identify how many of the patients who died after discharge died of the same illnesses for which they were hospitalized, or how many of those patients were expected to die. Nor do the numbers state the objective of the treatment plan, and compare that with the final outcome. Finally, the numbers do not identify any specific quality problems or prove that some patients may have lived had they been given different treatment.

Examples are the two patients (100% mortality) listed under gastrointestinal catastrophe category. The statistics do not tell that both patients were expected to die. Nor do the statistics tell that the objectives

of the treatment plans were to make the patients more comfortable by treating their illnesses' symptoms, rather than curing or "saving" the patients.

Again, we feel that HCFA's mortality statistics are no measure of quality of care, good or bad, in any facility. True and total quality of care can be measured only by individual case review. PCMH and our medical staff are satisfied with this facility's high quality of care as identified through individual case review. We are disappointed in the lack of significant quality of care indicators in the statistics released by the Health Care Finance Administration.

Sincerely,

PERRY COUNTY MEMORIAL HOSPITAL

Bradford W. Dykes

Bradford W. Dykes, CEO

Becky Elder, RN

Becky Elder, RN
Resource Utilization Director

drd

PORTER MEMORIAL HOSPITAL

814 LAPORTE AVE
VALPARAISO, IN 46383

Medicare Hospital Provider Number: 150035

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,619	12	9 - 14	2,437	13	9 - 14
Cancer	76	36	30 - 55	48	44	28 - 58
Cerebrovascular Accidents	98	28	18 - 37	76	32	17 - 40
Gastrointestinal Catastrophes	17	41	15 - 62	18	50	12 - 59
Infectious Disease	55	38	22 - 51	47	23	21 - 50
Metabolic/Electrolyte Disorders	41	37	16 - 49	58	26	16 - 44
Pulmonary Disease	182	24	18 - 34	149	27	17 - 35
Renal Failure	17	47	21 - 77	20	45	21 - 76
Severe Acute Heart Disease	50	34	23 - 51	74	42	26 - 50
Severe Chronic Heart Disease	116	30	14 - 32	113	21	13 - 30
Severe Trauma	5	40	4 - 78	5	40	2 - 79
Gastrointestinal Disease	217	4	1 - 8	184	4	1 - 9
Gynecologic Disease	25	0	0 -100	18	0	0 -100
Low-Risk Heart Disease	378	2	2 - 5	344	6	1 - 7
Musculoskeletal/Skin Conditions	223	2	1 - 7	226	3	1 - 7
Neuropsychiatric/Sensory Disease	76	5	0 - 24	58	5	0 - 42
Urologic Disease	148	1	0 - 11	126	2	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	379
Occupancy Rate (%):	60
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	132
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	305
Licensed Practical Nurses:	21

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Arthur S. Malasto
Administrator

PORTER MEMORIAL HOSPITAL

814 LaPorte Avenue • Valparaiso, Indiana 46383
Telephone (219) 465-4600

TRUSTEES
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President
Roger K. Claudon
Vice President
Suzanne Perkins
Secretary
Warren H. Canright
Eugene E. Kopczak
Chen T. Sun, M.D.
Leonard A. Troman

October 10, 1988

Ms. Sandra Kappert
The Healthcare Financing Administration
Health Standards and Quality Bureau
Meadows East Building 2D2
6325 Security Boulevard
Baltimore, MD 21207

Dear Ms. Kappert:

We have received the HCFA Mortality Data for Porter Memorial Hospital (Medicare Provider Number 150035) and would like to offer the following comments:

1. In reviewing the data, Porter Memorial Hospital's actual mortality rate falls within the predicted range for all sixteen categories as well as the overall category for both 1986 and 1987.

2. As a death is attributed to a hospital if the patient expires within 30 days of admission, it is possible that a patient would die after being discharged from Porter Memorial Hospital yet have the death attributed to Porter Memorial Hospital. In the 16 categories studied by Medicare for 1987, there were a total of 231 deaths attributed to Porter Memorial Hospital. Thirty seven, or 16%, of these deaths occurred after the patient had been discharged from Porter Memorial Hospital. In reviewing the same information for 1986, 54, or 17%, of the 309 Medicare deaths attributed to Porter Memorial Hospital occurred after the patient had been discharged from Porter Memorial Hospital.

3. The Medicare data which you provided to us indicated there were 2,619 Medicare discharges in 1987 with an overall mortality rate of 12%. In reviewing our records, we show 3,914 discharges with 282 deaths, or 7.2%. The discrepancy in these figures may be due to the following:

   A. Multiple admissions to Porter Memorial Hospital for a single Medicare patient, or

B. A Medicare patient being discharged from Porter Memorial Hospital but readmitted to another hospital in 1987.

4. The Medicare information for 1986 indicates we had 2,437 Medicare admissions and a mortality rate of 13%. Our data indicates we had 3,713 Medicare admissions in 1986 with a mortality rate of 8.2%.

5. The data provided to us by Medicare indicates we have 278 beds. We are actually licensed for 353 beds.

6. The Medicare data indicates we have 128 physicians on our Medical Staff with 45% of our specialists Board Certified. In actuality, 70 of our 103 specialists, or 68%, are Board Certified.

7. The Medicare data indicated we had no Coronary Care Unit. We do have a 16-bed Coronary Care and Intensive Care combined unit with all beds fully monitored.

8. The Medical Staff of Porter Memorial Hospital conducts a <u>thorough</u> Quality Assurance Program which evaluates the quality of care provided to all patients at Porter Memorial Hospital. Particular attention is given to patients who expire at Porter Memorial Hospital.

In summary, given the fact Porter Memorial Hospital is a referral center for our area providing extensive programs in Oncology, Cardiology, Pulmonary Disease, and Trauma, we feel our mortality statistics are appropriate for the type of patients we serve.

Even though we are pleased with these statistics, we do not believe HCFA Mortality Data is, in itself, a complete and accurate measure of the quality of care provided by our institution; rather, the quality of care provided by physicians and employees of Porter Memorial Hospital must be evaluated through our internal quality assurance program as well as by a variety of external agencies that evaluate us including the Joint Commission on Accreditation of Healthcare Organizations, the Indiana State Board of Health, and the Nuclear Regulatory Commission.

Sincerely,

Arthur S. Malasto

Arthur S. Malasto
Administrator

ASM/jsh

cc: Board of Trustees
Medical Staff Executive Committee

PULASKI MEMORIAL HOSPITAL

616 EAST 13TH STREET
WINAMAC, IN 46996

Medicare Hospital Provider Number: 150095

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	344	15	10 - 18	363	15	9 - 17
Cancer	10	60	26 - 81	12	67	19 - 70
Cerebrovascular Accidents	37	19	16 - 43	25	20	15 - 47
Gastrointestinal Catastrophes	3	33	3 - 86	1	100	0 - 99
Infectious Disease	3	67	3 - 86	2	100	8 - 92
Metabolic/Electrolyte Disorders	4	25	2 - 81	4	0	2 - 73
Pulmonary Disease	19	32	12 - 54	32	31	14 - 47
Renal Failure	1	100	0 - 99	2	50	7 - 99
Severe Acute Heart Disease	16	13	20 - 56	11	45	16 - 70
Severe Chronic Heart Disease	23	43	10 - 50	23	52	5 - 47
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	41	0	1 - 13	43	2	0 - 21
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	47	6	0 - 36	41	2	0 - 23
Musculoskeletal/Skin Conditions	34	6	0 - 86	44	2	0 - 23
Neuropsychiatric/Sensory Disease	7	0	0 -100	6	0	0 -100
Urologic Disease	21	14	0 - 82	14	7	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	47
Occupancy Rate (%):	38
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	16
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	0
Registered Nurses:	28
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PUTNAM CO HOSP

1542 BLOOMINGTON ST
GREENCASTLE, IN 46135

Medicare Hospital Provider Number: 150027

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	611	16	11 - 18	669	15	12 - 18
Cancer	11	73	26 - 77	10	50	19 - 75
Cerebrovascular Accidents	17	12	17 - 51	41	41	15 - 45
Gastrointestinal Catastrophes	7	57	11 - 75	5	40	4 - 78
Infectious Disease	8	63	14 - 75	3	67	9 - 90
Metabolic/Electrolyte Disorders	9	44	5 - 67	8	13	5 - 60
Pulmonary Disease	57	19	16 - 39	59	27	20 - 45
Renal Failure	5	60	10 - 84	3	67	12 - 96
Severe Acute Heart Disease	27	56	24 - 61	34	41	24 - 57
Severe Chronic Heart Disease	38	26	11 - 40	46	35	12 - 40
Severe Trauma	2	0	1 - 91	3	33	3 - 86
Gastrointestinal Disease	48	2	0 - 18	55	4	0 - 20
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	59	5	1 - 17	57	2	1 - 13
Musculoskeletal/Skin Conditions	51	8	0 - 30	42	5	0 - 37
Neuropsychiatric/Sensory Disease	11	9	0 - 99	15	0	0 - 95
Urologic Disease	37	3	0 - 25	30	0	0 - 23

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	85
Occupancy Rate (%):	34
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	24
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	0
Registered Nurses:	33
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

RANDOLPH COUNTY HOSPITAL

325 SOUTH OAK ST
WINCHESTER, IN 47394

Medicare Hospital Provider Number: 150054

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	222	10	8 - 17	231	10	7 - 16
Cancer	2	0	4 - 89	3	100	14 - 86
Cerebrovascular Accidents	8	50	9 - 70	7	0	6 - 52
Gastrointestinal Catastrophes	3	33	5 - 87	0	-	-
Infectious Disease	7	29	6 - 69	7	29	12 - 74
Metabolic/Electrolyte Disorders	4	0	5 - 71	3	33	1 - 87
Pulmonary Disease	20	10	10 - 41	21	14	8 - 42
Renal Failure	2	100	5 - 90	0	-	-
Severe Acute Heart Disease	6	33	13 - 78	8	25	15 - 72
Severe Chronic Heart Disease	12	8	7 - 47	13	23	6 - 54
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	19	0	0 - 39	19	0	0 - 78
Gynecologic Disease	1	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	20	5	0 - 79	19	0	0 - 45
Musculoskeletal/Skin Conditions	18	0	0 -100	29	0	0 - 49
Neuropsychiatric/Sensory Disease	7	0	0 - 65	6	0	0 -100
Urologic Disease	5	20	0 -100	5	20	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	30
Occupancy Rate (%):	35
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	8
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	18
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

REID MEMORIAL HOSPITAL INC

1401 CHESTER BOULEVARD
RICHMOND, IN 47374

Medicare Hospital Provider Number: 150048

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,589	13	10 - 14	2,475	11	9 - 13
Cancer	75	37	26 - 51	70	33	26 - 52
Cerebrovascular Accidents	104	25	17 - 36	91	26	16 - 36
Gastrointestinal Catastrophes	26	31	16 - 55	16	38	13 - 61
Infectious Disease	14	29	13 - 60	17	24	13 - 56
Metabolic/Electrolyte Disorders	56	27	17 - 46	53	21	13 - 41
Pulmonary Disease	185	23	15 - 31	136	22	17 - 34
Renal Failure	11	45	6 - 70	11	55	15 - 78
Severe Acute Heart Disease	114	39	27 - 48	112	44	29 - 49
Severe Chronic Heart Disease	146	28	15 - 31	142	30	14 - 31
Severe Trauma	3	67	5 - 87	3	0	3 - 79
Gastrointestinal Disease	250	3	1 - 7	191	3	1 - 7
Gynecologic Disease	19	0	0 -100	22	0	0 -100
Low-Risk Heart Disease	213	4	1 - 8	212	3	1 - 7
Musculoskeletal/Skin Conditions	208	4	0 - 9	205	1	1 - 5
Neuropsychiatric/Sensory Disease	148	1	0 - 9	138	1	0 - 7
Urologic Disease	120	1	0 - 9	135	2	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	349
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	95
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	0
Registered Nurses:	176
Licensed Practical Nurses:	55

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

reid memorial hospital

Medicare Provider#: 15-0048

October 20, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Improving the quality of healthcare is and will continue to be a primary goal of Reid Memorial Hospital. Measuring, analyzing and distributing information about quality is a crucial part of that goal.

Again this year, Reid Memorial has received and reviewed the HCFA mortality rates which will be published in December. We wish to correct the base data information provided for our hospital. While the reports lists our institution as having 170 beds we actually have 291 beds. Also, under specialty services we are not listed as providing Hospice services. Reid Hospital does have a Hospice program which has provided services to terminal patients for several years.

The mortality rates listed are compiled from data on Medicare patients who expired during hospitalization in our institution in 1987 or who's death occurred within 30 days of such hospitalization. In reviewing those records we find that a full 20% of the deaths occurred during this 30 day period. The majority of these patients were patients who were transferred to Extended Care Facilities or were patients receiving services through our Hospice program.

Although some changes have been made in the methodology used, the published rates still only state relationship between Medicare admissions and deaths. As in our situation with Hospice services, there is no correlation of cause and effect.

It is also interesting to note that when the revised methodology is applied to last year's data (1986), the one category in which our hospital was outside the range is modified so that we are retroactively "within the range."

We must state again that we do not believe that mortality rates alone can be used as quality indicators. Our hospital regularly and systematically reviews the quality and appropriateness of patient care and we feel it is important to make the public aware of these ongoing efforts. We agree with the need and the intent to develop statistical methods to assess quality. However, to date no statistical indicators have been validated. Until they are, it is unfair to provide the public with incomplete information.

Respectfully,

Dodie Preston

Dodie Preston, R.N.
Administrative Assistant

DP/sp

RICHMOND STATE HOSPITAL

498 NORTH WEST 18TH STREET
RICHMOND, IN 47374

Medicare Hospital Provider Number: 150135

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	25	0	3 - 20	32	3	2 - 22
Cancer	0	-	-	1	0	1 - 97
Cerebrovascular Accidents	0	-	-	1	100	0 - 99
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	4	0	4 - 70	3	0	3 - 79
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	2	0	0 -100	1	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	1	0	0 -100
Musculoskeletal/Skin Conditions	4	0	0 -100	3	0	0 -100
Neuropsychiatric/Sensory Disease	3	0	0 -100	3	0	0 -100
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	261
Ownership/Control:	State Government

STAFFING

Interns and Residents:	0
Registered Nurses:	7
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

RIVERVIEW HOSP
395 WESTFIELD RD
NOBLESVILLE, IN 46060

Medicare Hospital Provider Number: 150059

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	969	11	9 - 14	992	10	9 - 14
Cancer	29	41	20 - 57	27	30	22 - 58
Cerebrovascular Accidents	33	24	15 - 45	27	44	14 - 51
Gastrointestinal Catastrophes	3	0	4 - 79	7	57	15 - 79
Infectious Disease	11	27	12 - 64	8	25	17 - 75
Metabolic/Electrolyte Disorders	28	18	9 - 44	22	14	7 - 43
Pulmonary Disease	58	24	15 - 40	73	18	16 - 36
Renal Failure	2	0	9 - 93	2	100	7 - 92
Severe Acute Heart Disease	27	52	20 - 57	41	39	27 - 57
Severe Chronic Heart Disease	46	26	12 - 38	33	18	14 - 42
Severe Trauma	2	50	3 - 92	1	0	0 - 98
Gastrointestinal Disease	91	2	1 - 10	96	3	1 - 12
Gynecologic Disease	12	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	126	5	1 - 11	123	2	1 - 9
Musculoskeletal/Skin Conditions	81	2	0 - 13	87	3	0 - 22
Neuropsychiatric/Sensory Disease	27	0	0 - 23	26	8	0 - 93
Urologic Disease	32	0	0 - 23	35	0	0 - 47

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	123
Occupancy Rate (%):	50
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	65
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	0
Registered Nurses:	76
Licensed Practical Nurses:	16

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

RUSH MEM HOSP

1300 N MAIN ST
RUSHVILLE, IN 46173

Medicare Hospital Provider Number: 150092

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	321	16	9 - 18	336	16	10 - 18
Cancer	1	0	1 - 97	3	33	9 - 89
Cerebrovascular Accidents	13	15	12 - 55	14	50	8 - 58
Gastrointestinal Catastrophes	2	50	7 - 95	4	100	6 - 72
Infectious Disease	2	0	1 - 89	4	25	10 - 83
Metabolic/Electrolyte Disorders	5	0	3 - 65	5	0	2 - 67
Pulmonary Disease	36	31	13 - 44	32	22	14 - 45
Renal Failure	3	67	9 - 91	2	50	8 - 98
Severe Acute Heart Disease	13	62	17 - 67	22	45	20 - 60
Severe Chronic Heart Disease	21	19	10 - 46	22	36	8 - 48
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	36	8	0 - 61	41	2	1 - 18
Gynecologic Disease	2	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	32	3	0 - 31	35	3	0 - 29
Musculoskeletal/Skin Conditions	21	5	0 - 69	21	0	0 - 70
Neuropsychiatric/Sensory Disease	7	0	0 -100	2	0	0 -100
Urologic Disease	19	0	0 - 76	19	5	0 - 93

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	36
Occupancy Rate (%):	38
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	7
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	0
Registered Nurses:	24
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SCOTT COUNTY MEMORIAL HOSPITAL

HIGHWAY 31 NORTH
SCOTTSBURG, IN 47170

Medicare Hospital Provider Number: 150052

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	471	14	11 - 18	491	14	10 - 17
Cancer	3	33	3 - 86	6	67	18 - 84
Cerebrovascular Accidents	18	28	10 - 51	15	13	14 - 52
Gastrointestinal Catastrophes	3	0	1 - 82	2	0	1 - 89
Infectious Disease	6	33	10 - 76	2	0	7 - 90
Metabolic/Electrolyte Disorders	18	6	13 - 45	11	18	6 - 57
Pulmonary Disease	84	32	18 - 41	110	19	15 - 33
Renal Failure	3	0	8 - 83	2	50	7 - 96
Severe Acute Heart Disease	10	60	19 - 74	9	67	15 - 71
Severe Chronic Heart Disease	33	27	11 - 42	34	32	12 - 44
Severe Trauma	1	0	2 - 97	0	-	-
Gastrointestinal Disease	54	6	0 - 30	33	0	0 - 19
Gynecologic Disease	0	-	-	2	0	0 -100
Low-Risk Heart Disease	51	8	1 - 24	60	7	0 - 22
Musculoskeletal/Skin Conditions	36	0	0 - 19	31	0	0 - 67
Neuropsychiatric/Sensory Disease	7	0	0 -100	9	0	0 -100
Urologic Disease	19	0	0 - 72	19	5	0 - 88

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	65
Occupancy Rate (%):	43
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	12
Percent of Physicians Who Are Board Certified Specialists:	8
Interns and Residents:	0
Registered Nurses:	19
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST ANTHONY HOSPITAL

310 W HOMER ST
MICHIGAN CITY, IN 46360

Medicare Hospital Provider Number: 150015

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,364	11	9 - 14	1,244	12	9 - 14
Cancer	32	28	27 - 60	39	41	24 - 57
Cerebrovascular Accidents	49	24	14 - 39	60	23	17 - 40
Gastrointestinal Catastrophes	11	36	13 - 67	18	33	16 - 61
Infectious Disease	29	38	20 - 57	15	20	16 - 59
Metabolic/Electrolyte Disorders	20	40	10 - 55	20	50	12 - 57
Pulmonary Disease	69	29	17 - 41	68	25	13 - 37
Renal Failure	5	20	6 - 78	3	67	4 - 88
Severe Acute Heart Disease	36	50	22 - 55	33	45	23 - 57
Severe Chronic Heart Disease	79	16	16 - 34	87	18	13 - 31
Severe Trauma	3	0	4 - 79	0	-	-
Gastrointestinal Disease	135	2	1 - 8	125	7	1 - 14
Gynecologic Disease	19	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	162	4	1 - 9	114	3	1 - 9
Musculoskeletal/Skin Conditions	112	1	0 - 8	130	2	1 - 8
Neuropsychiatric/Sensory Disease	28	4	0 - 46	22	5	0 - 99
Urologic Disease	78	1	0 - 17	59	2	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	190
Occupancy Rate (%):	57
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

301 West Homer Street, Michigan City, Indiana 46360, 219-879-8511

October 21, 1988

William L. Roper, M. D.
Administrator
Health Standards & Quality Bureau
Health Care Financing Administration
PO Box 26684
Baltimore, MD 21207

Dear Dr. Roper:

The Administration and Board of Directors of Saint Anthony Hospital appreciates the opportunity provided us to review and comment on the mortality statistical information for 1987 Medicare patients hospitalized at Saint Anthony Hospital.

Our analysis of hospital data shows an overall 10.4% actual mortality data for all Medicare cases vs. the 11% reported in your analysis. We are unable to verify deaths for those cases who were discharged in good condition to nursing homes or who transferred out of our service area.

I submit for your records the 1987 hospital characteristics.

We appreciate the attempts by HCFA to adjust the data for severity of illness. While the Medicare Mortality Prediction System (MMPS) may provide a means of making a partial adjustment for severity, the problem remains, i.e., valid statistical norms have yet to be developed. To date, no method has been validated as an indicator of quality.

I strongly encourage you to identify other analytical methods which will include the severity of illness and case mix index.

Sincerely,

Edel Dunne-O'Toole

Edel Dunne-O'Toole
President

EDO:aa

enclosure

ST ANTHONY MEDICAL CENTER

MAIN AND FRANCISCAN RD
CROWN POINT, IN 46307

Medicare Hospital Provider Number: 150126

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,856	12	9 - 14	1,777	11	9 - 14
Cancer	49	45	30 - 60	64	39	27 - 54
Cerebrovascular Accidents	53	19	15 - 38	64	23	17 - 40
Gastrointestinal Catastrophes	15	20	12 - 56	9	22	12 - 67
Infectious Disease	23	30	21 - 60	27	33	27 - 65
Metabolic/Electrolyte Disorders	37	43	18 - 53	30	37	15 - 53
Pulmonary Disease	108	30	19 - 39	69	30	14 - 38
Renal Failure	1	100	3 - 98	2	0	1 - 91
Severe Acute Heart Disease	55	40	27 - 55	76	38	27 - 51
Severe Chronic Heart Disease	121	21	15 - 31	90	27	14 - 34
Severe Trauma	3	0	1 - 82	6	17	5 - 70
Gastrointestinal Disease	103	0	1 - 6	103	2	1 - 9
Gynecologic Disease	7	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	421	5	1 - 6	445	5	1 - 6
Musculoskeletal/Skin Conditions	142	2	0 - 9	142	1	1 - 6
Neuropsychiatric/Sensory Disease	22	0	0 - 85	45	0	0 - 21
Urologic Disease	72	1	0 - 16	71	3	0 - 32

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	330
Occupancy Rate (%):	51
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	204
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	276
Licensed Practical Nurses:	32

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

St. Anthony Medical Center, Inc.

October 13, 1988

Health Care Financing Administration
Health Standards and Quality Review
Meadows East Building 2-2D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Sandra Kappert

Re: Hospital ID 150126
St. Anthony Medical Center

Dear Dr. Roper:

We recently received our mortality information for calendar year 1987. Again, as last year, we appreciate that this information has been sent to us in advance of it's public release so that we would have time to adequately review the data. The changes that we found were related to two areas.

1. Additional hospital deaths that were not included.

2. Changes made by the PRO in the principal diagnosis which resulted in a change in the diagnostic category.

The detail of these changes is included on Exhibit A-1 and A-2. The impact of these changes on our mortality is reflected on Exhibit B.

We were also provided some characteristics on our hospital that was reported to the American Hospital Association in 1986. Much of this information is in error and is also corrected on Exhibit B. We have also included the document which we submitted to the AHA to substantiate the changes we made. This is Exhibit C.

We found it very helpful to have all of the cases listed for each diagnostic category so that all of the data could be verified. In addition, the comparative data from last year, adjusted to this year's methodology was useful in establishing trends.

Telephones:
Merrillville (219) 738-2100
Crown Point (219) 663-8120
Lowell, Shelby &
Cedar Lake (219) 374-9514

Main & Franciscan Road
Crown Point, Indiana 46307

However, we still feel that this statistical information says nothing about cause and effect, and by itself is not a complete measure of the quality of care at our hospital. The rates only state relationships between Medicare admissions and death; only a review of each medical record can determine that.

While we believe that this information is useful, as a focus tool, until additional statistical measures to deal with complex issues such as severity of illness are available, judgements about the true quality of care cannot be made.

Thank you for the opportunity to comment.

Sincerely,

Stephen O. Leurck

Stephen O. Leurck
President

SOL/vs

Enclosures

ST CATHERINE HOSP OF EAST CHICAGO

4321 FIR ST
EAST CHICAGO, IN 46312

Medicare Hospital Provider Number: 150008

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,669	11	8 - 13	1,637	12	9 - 14
Cancer	60	37	31 - 59	77	52	32 - 58
Cerebrovascular Accidents	63	37	15 - 39	67	22	13 - 35
Gastrointestinal Catastrophes	13	31	12 - 62	13	38	14 - 65
Infectious Disease	17	12	14 - 51	9	44	11 - 70
Metabolic/Electrolyte Disorders	24	21	8 - 46	22	41	5 - 50
Pulmonary Disease	70	26	13 - 36	51	27	15 - 41
Renal Failure	8	50	14 - 80	7	43	14 - 83
Severe Acute Heart Disease	61	49	23 - 50	73	40	25 - 50
Severe Chronic Heart Disease	91	21	14 - 32	101	19	14 - 31
Severe Trauma	1	0	0 - 99	5	20	6 - 75
Gastrointestinal Disease	122	3	0 - 11	134	3	1 - 9
Gynecologic Disease	12	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	283	4	1 - 7	268	2	1 - 6
Musculoskeletal/Skin Conditions	174	1	1 - 6	143	1	0 - 8
Neuropsychiatric/Sensory Disease	102	1	0 - 15	100	3	0 - 23
Urologic Disease	56	2	0 - 70	70	3	0 - 31

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	230
Occupancy Rate (%):	85
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	173
Percent of Physicians Who Are Board Certified Specialists:	62
Interns and Residents:	0
Registered Nurses:	257
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

[illegible] Street
[illegible] Chicago, IN 46312
[illegible] 762-1570

St. Catherine Hospital

October 20, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health and Human Services
Washington D.C. 20201

Dear Dr. Roper,

We thank the Health Care Financing Administration for the opportunity to review and respond to the Medicare patients' mortality data for 1987. The hospital acknowledges and supports the Health Care Financing Administration and other reputable and qualified organizations and agencies, such as the American Hospital Association and the Joint Commission on Healthcare Organizations, in their effort to promote consumer awareness and understanding of quality healthcare indicators.

Representative of our commitment to quality health care, St. Catherine Hospital employs its comprehensive Quality Assurance Program to ensure the continuous evaluation of patient care. Our medical staff's peer review of patient mortality data is one component of the program. Because we recognize that mortality rates by themselves are not a complete measure of quality care, we analyze data on all patients, in all circumstances. We believe our program accounts for the unique characteristics of our patients, our hospital, and our community. We consider the information generated by the Health Care Financing Administration one of the tools used to determine quality care.

Allowing for the model's limitations, we believe the data representing St. Catherine Hospital is generally accurate. We have included an addendum of corrections to statistics listed below the mortality data. We recognize the changes the Health Care Financing Administration has made to the model in an effort to make it a more valid assessment of quality care, and we support further progress in this area.

Sincerely,

John R. Birdzell
President

JRB/cfh

ST ELIZABETH HOSP MED CENTER

1501 HARTFORD STREET
LAFAYETTE, IN 47904

Medicare Hospital Provider Number: 150003

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,323	12	10 - 14	2,260	14	10 - 15
Cancer	79	38	31 - 56	117	49	30 - 53
Cerebrovascular Accidents	72	39	16 - 40	83	25	18 - 38
Gastrointestinal Catastrophes	22	36	16 - 58	21	52	13 - 57
Infectious Disease	34	50	18 - 54	30	43	19 - 57
Metabolic/Electrolyte Disorders	35	14	15 - 44	50	26	13 - 42
Pulmonary Disease	106	30	16 - 36	128	23	15 - 33
Renal Failure	8	50	19 - 86	17	35	12 - 69
Severe Acute Heart Disease	118	31	28 - 48	96	35	29 - 51
Severe Chronic Heart Disease	128	23	14 - 30	95	22	15 - 34
Severe Trauma	4	0	5 - 71	3	67	4 - 86
Gastrointestinal Disease	166	1	1 - 6	199	5	1 - 9
Gynecologic Disease	20	5	0 -100	18	0	0 - 99
Low-Risk Heart Disease	321	3	2 - 6	290	6	1 - 8
Musculoskeletal/Skin Conditions	157	2	0 - 8	147	3	0 - 10
Neuropsychiatric/Sensory Disease	54	2	1 - 14	51	2	0 - 21
Urologic Disease	109	5	1 - 13	101	0	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	260
Occupancy Rate (%):	56
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	182
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	216
Licensed Practical Nurses:	52

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Our business is life

October 21, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Hospital Mortality Information
ATTN: Sandra Kappert
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, MD 21207

RE: Mortality Data
St. Elizabeth Hospital
Hospital ID: 150003

Dear Dr. Roper:

We appreciate every opportunity to evaluate the quality of care delivered at this Medical Center and noted in reviewing your findings that our rates are within the predicted norm for all diagnostic categories. We used the information you provided us as an opportunity to reexamine the cases included in your sample. (The deaths had been reviewed originally because our medical staff standards committees look at all deaths. This is part of our ongoing efforts to look for unusual patterns or avoidable outcomes.)

In our reexamination we noted one error. One patient identified as dying in the hospital was in fact discharged alive.*

Also in our reexamination, we found that all 34 infectious disease cases were individuals who actually came to the hospital with sepsis. These patients had underlying chronic illnesses such as cancer, leukemia, renal failure, and COPD.

St. Elizabeth Hospital is a regional referral center. In fact, nearly half of the patient days are from patients who reside outside of Tippecanoe County. An important role of regional referral centers such as St. Elizabeth Hospital is to provide care needed by the most seriously ill patients. To that end, St. Elizabeth has developed highly specialized services to care for cancer, heart, pulmonary, and renal dialysis patients.

The hospital cancer program services the entire region and is accredited by the American College of Surgeons. We provide cancer chemotherapy services, the only radiation oncology services in mid-north Indiana, and a hospice program has been in place for 2 1/2 years.

Likewise, the hospital is the heart center for the region, providing a full spectrum of services including cardiac catheterization, angioplasty, open heart surgery, major vascular surgery, and cardiac rehabilitation.

Sincerely,

Paul E. Hess

Paul E. Hess
President

ST FRANCIS HOSPITAL CENTER

1600 ALBANY STREET
BEECH GROVE, IN 46107

Medicare Hospital Provider Number: 150033

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,856	13	10 - 14	3,712	13	10 - 15
Cancer	148	44	29 - 50	143	43	32 - 53
Cerebrovascular Accidents	138	22	18 - 34	153	29	20 - 36
Gastrointestinal Catastrophes	21	33	16 - 58	23	39	17 - 58
Infectious Disease	55	27	22 - 50	58	41	22 - 52
Metabolic/Electrolyte Disorders	68	19	16 - 42	80	19	14 - 39
Pulmonary Disease	193	29	18 - 35	199	30	19 - 36
Renal Failure	3	0	18 - 94	7	43	13 - 82
Severe Acute Heart Disease	146	40	29 - 48	124	42	30 - 49
Severe Chronic Heart Disease	183	26	17 - 31	177	27	16 - 31
Severe Trauma	6	33	3 - 74	10	40	8 - 67
Gastrointestinal Disease	257	3	1 - 7	298	2	1 - 6
Gynecologic Disease	33	0	0 -100	39	3	0 - 85
Low-Risk Heart Disease	568	5	1 - 6	438	4	2 - 6
Musculoskeletal/Skin Conditions	350	3	1 - 6	320	3	1 - 6
Neuropsychiatric/Sensory Disease	73	3	0 - 18	89	3	0 - 16
Urologic Disease	145	3	0 - 16	137	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	415
Occupancy Rate (%):	78
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	195
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	18
Registered Nurses:	505
Licensed Practical Nurses:	76

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

ST JOHNS MEDICAL CENTER

2015 JACKSON ST
ANDERSON, IN 46014

Medicare Hospital Provider Number: 150088

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,092	13	10 - 14	2,060	13	10 - 14
Cancer	62	48	30 - 57	66	42	29 - 56
Cerebrovascular Accidents	89	31	17 - 37	93	32	19 - 40
Gastrointestinal Catastrophes	13	38	12 - 63	20	50	16 - 61
Infectious Disease	26	35	15 - 54	21	24	20 - 59
Metabolic/Electrolyte Disorders	70	29	15 - 42	41	24	12 - 43
Pulmonary Disease	91	26	17 - 38	96	36	14 - 36
Renal Failure	3	67	8 - 90	4	50	11 - 90
Severe Acute Heart Disease	72	44	25 - 50	79	39	26 - 49
Severe Chronic Heart Disease	131	17	14 - 28	129	21	14 - 30
Severe Trauma	5	20	5 - 75	1	0	0 - 98
Gastrointestinal Disease	160	6	1 - 11	189	2	2 - 7
Gynecologic Disease	23	0	0 -100	30	0	0 - 98
Low-Risk Heart Disease	226	3	2 - 7	197	4	1 - 8
Musculoskeletal/Skin Conditions	190	3	1 - 8	175	2	1 - 7
Neuropsychiatric/Sensory Disease	77	3	0 - 39	82	0	0 - 10
Urologic Disease	123	1	0 - 8	127	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	371
Occupancy Rate (%):	52
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	102
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	186
Licensed Practical Nurses:	32

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No



Saint John's
Health Care Corporation

Mr. William L. Roper, M.D.
Administrator
Health Care Financing Administration
Health Standards & Quality Bureau
Hospital Mortality Information
P. O. Box 26684
Baltimore, Maryland 21207

Dear Mr. Roper,

We find that the statistical data sent to us to be reasonably accurate in regards to the data of those admitted and discharged. Obviously, we cannot verify deaths which occur after discharge nor the relativity of that death to the reason of admission or treatment.

We do, however, have a disagreement on one significant statistical methodology of calculation for the totals. We understand that the patient may only expire once and therefore you calculate totals on each patient. However, each admission for the patient is a potential death and, therefore, all previous admissions with successful outcomes are eliminated. For example, a patient with severe chronic heart disease could be admitted 5 to 6 times and successfully be stabilized, but on the seventh admission expire. This would be a 100% death rate if that was your only patient, where if all admissions were calculated, the successful outcomes would be statistically indicated with the death rate of 14.3%.

We realize that even with this methodology that St. John's Medical Center is within range and generally at the low end of the range, however, we still feel that the statistics are inflated and, therefore, question their statistical relevance. Our actual rate is not the 13% indicated but a 6% rate as substantiated through the PRO and CPHA (PAS Professional Activities Study). This makes a significant difference to the general public who could potentially be interpreting their admission outcome probability as 13% rather than 6%. I personally would prefer a 6% probability to a 13% probability.

The second concern has obviously been expressed before and that is on types and levels of care by certain disease processes. Obviously hospice level treatment will have a higher death rate than OB, psych., etc. Since cancer and heart disease are the two greatest death processes, these statistics will be higher in a institution that is a Cancer Referral Center or heart disease facility.

I do hope you will review this information and methodology prior to releasing any mortality rates to the public and potentially causing additional stress and anxiety regarding hospitalization. We respectfully ask that you revise your statistical totals.

Please fell free to contact me at 1-317-646-8132.

Sincerely,

Donald L. Apple

CC: James H. Stephens
Jerry D. Brumitt

DA/cb
10-18-88

ST JOSEPH HOSP AND HLTH CTR OF KOKOM

1907 WEST SYCAMORE STREET
KOKOMO, IN 46901

Medicare Hospital Provider Number: 150010

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,552	15	9 - 14	1,598	17	10 - 15
Cancer	59	63	24 - 52	70	60	31 - 58
Cerebrovascular Accidents	43	30	13 - 42	53	32	15 - 41
Gastrointestinal Catastrophes	12	50	10 - 64	19	32	15 - 58
Infectious Disease	12	67	12 - 64	22	36	22 - 64
Metabolic/Electrolyte Disorders	52	23	12 - 41	37	22	10 - 42
Pulmonary Disease	69	26	19 - 42	73	26	14 - 37
Renal Failure	7	43	10 - 79	8	50	16 - 83
Severe Acute Heart Disease	54	56	26 - 53	51	61	25 - 53
Severe Chronic Heart Disease	110	29	13 - 32	130	28	16 - 33
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	140	2	1 - 8	131	4	1 - 10
Gynecologic Disease	24	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	184	3	1 - 8	211	4	1 - 8
Musculoskeletal/Skin Conditions	134	1	0 - 8	156	6	0 - 12
Neuropsychiatric/Sensory Disease	35	9	0 - 72	32	3	0 - 40
Urologic Disease	70	1	0 - 37	52	4	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	161
Occupancy Rate (%):	67
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	77
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	0
Registered Nurses:	173
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Saint Joseph
HOSPITAL & HEALTH CENTER

October 20, 1988

William L. Roper, Administrator
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

I am writing regarding the hospital-specific mortality data for 1987 planned for public release in December. We remain concerned this year, as we were last, with two serious flaws in HCFA's analysis of mortality statistics. First, we are quite troubled by the serious discrepancies between your records and ours. Second, the 1987 predicted and actual mortality rates still fail to consider the severity of the patient's condition at the time of admission. We have tried below to clarify our position on these two issues.

Record Discrepancies

We are in the process of doing a thorough comparison with our records of each of the cases and deaths appearing on your list. The problem appears to center largely on cases missing from your data files. At this point, we have completed this comparison for the cancer category. In our analysis, we used the same criteria as HCFA to identify patients whose last admission for the diagnosis of cancer in 1987 was at this hospital.

The resulting list should be identical to that published by HCFA, and yet we find that our list includes a greater number of both total cases and deaths. Further, the actual mortality rate is well within the predicted range at 38.3% rather than the 63% computed by HCFA. The differences between your records and ours are summarized below in Figure 1. In the absence of any procedure to reconcile these differences, we must assume our information to be correct, since it is primary data and yours is secondary. We have attached a detailed listing of patients omitted from your file, and would request that you reconcile this list with your records. When we have completed our analysis of the other categories, we may find similar discrepancies.

	Total Cases	Deaths	Actual Mortality Rate	Predicted Mortality Rate (% Range)
HCFA RECORDS	59	37	62.7%	24 - 52%
HOSPITAL RECORDS	127	49	38.6%	24 - 52%

If the margin of error found in the cancer category is representative of the entire study, our overall mortality rate for all causes would be 9.2%, well within the predicted range. While this analysis is not likely to be completed before the October 24 response deadline, we would hope that you would reconcile your records in these categories as well.

Severity at Admission

The other flaw in the HCFA mortality model is its inability to adjust predicted mortality rates according to the severity of the patient's condition at the time of admission. Since Saint Joseph Hospital is a regional referral center for cancer, heart disease, hospice, and many high risk surgical procedures, we have a relatively greater percentage of severely ill patients. While severity is difficult to measure precisely, we know that a great number of Medicare patients are admitted to this hospital in very serious condition.

We feel that the health care delivered at Saint Joseph Hospital by both physicians and staff is of exceptionally high quality. Moreover, we are continually striving to enhance and improve our performance in this area. We offer to you our assistance and cooperation in whatever way possible to help improve the reliability and consistency of the information being published in this report.

Sincerely,

Sister M. Martin McEntee

Sister M. Martin McEntee
President

SMM/epa

Attachment

ST JOSEPH HOSP OF MISHAWAKA IND INC

215 W 4TH ST
MISHAWAKA, IN 46544

Medicare Hospital Provider Number: 150029

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,032	13	9 - 14	1,099	12	9 - 14
Cancer	31	45	24 - 60	21	57	20 - 62
Cerebrovascular Accidents	50	34	13 - 40	34	32	16 - 48
Gastrointestinal Catastrophes	6	50	3 - 75	10	40	12 - 69
Infectious Disease	12	33	20 - 71	25	40	15 - 55
Metabolic/Electrolyte Disorders	19	21	7 - 48	18	33	10 - 55
Pulmonary Disease	58	12	15 - 35	72	19	14 - 36
Renal Failure	0	-	-	1	100	2 - 98
Severe Acute Heart Disease	36	44	25 - 57	57	30	25 - 50
Severe Chronic Heart Disease	71	25	13 - 34	59	17	14 - 35
Severe Trauma	1	100	0 - 97	0	-	-
Gastrointestinal Disease	76	1	1 - 11	77	6	0 - 26
Gynecologic Disease	10	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	112	2	1 - 8	127	2	1 - 8
Musculoskeletal/Skin Conditions	130	1	0 - 7	128	1	1 - 7
Neuropsychiatric/Sensory Disease	16	0	0 -100	27	4	0 - 52
Urologic Disease	32	6	0 - 84	49	2	0 - 30

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	117
Occupancy Rate (%):	56
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST JOSEPH MEDICAL CENTER

700 BROADWAY
FORT WAYNE, IN 46802

Medicare Hospital Provider Number: 150047

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,014	11	9 - 13	2,028	11	9 - 13
Cancer	51	43	24 - 53	65	38	24 - 51
Cerebrovascular Accidents	88	26	17 - 37	72	24	17 - 38
Gastrointestinal Catastrophes	23	39	15 - 56	7	29	6 - 70
Infectious Disease	26	31	18 - 56	20	40	15 - 59
Metabolic/Electrolyte Disorders	43	28	13 - 45	41	20	9 - 40
Pulmonary Disease	78	21	17 - 38	78	19	16 - 36
Renal Failure	9	0	16 - 66	15	33	13 - 71
Severe Acute Heart Disease	56	34	23 - 50	65	42	30 - 55
Severe Chronic Heart Disease	133	19	16 - 31	99	23	16 - 34
Severe Trauma	4	25	3 - 80	2	50	0 - 94
Gastrointestinal Disease	137	4	1 - 10	164	2	1 - 8
Gynecologic Disease	20	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	329	6	1 - 7	338	4	2 - 7
Musculoskeletal/Skin Conditions	194	2	1 - 6	184	3	1 - 8
Neuropsychiatric/Sensory Disease	112	2	0 - 13	97	3	0 - 15
Urologic Disease	67	1	0 - 19	59	0	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	323
Occupancy Rate (%):	68
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	201
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	249
Licensed Practical Nurses:	67

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

ST JOSEPHS HOSP

LELAND HEIGHTS P O BOX 148
HUNTINGBURG, IN 47542

Medicare Hospital Provider Number: 150019

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	545	13	11 - 18	587	10	10 - 16
Cancer	16	25	17 - 60	7	43	11 - 75
Cerebrovascular Accidents	23	30	13 - 50	28	29	16 - 49
Gastrointestinal Catastrophes	4	50	9 - 85	1	0	0 - 99
Infectious Disease	7	29	15 - 77	9	11	15 - 64
Metabolic/Electrolyte Disorders	13	8	6 - 47	18	11	7 - 44
Pulmonary Disease	63	21	14 - 37	60	20	16 - 39
Renal Failure	5	40	10 - 84	2	50	3 - 93
Severe Acute Heart Disease	28	39	24 - 60	26	35	22 - 59
Severe Chronic Heart Disease	35	23	13 - 41	32	25	12 - 43
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	32	0	0 - 28	45	0	0 - 16
Gynecologic Disease	8	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	62	2	1 - 12	87	3	1 - 13
Musculoskeletal/Skin Conditions	51	0	1 - 11	76	0	1 - 8
Neuropsychiatric/Sensory Disease	5	0	0 -100	14	7	0 - 63
Urologic Disease	29	0	0 - 37	19	5	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	76
Occupancy Rate (%):	40
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	30
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	0
Registered Nurses:	53
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

St. Joseph's
Hospital

We care...it's our way of life.

Leland Heights
Huntingburg, Indiana 47542
(812) 683-2121

October 20, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

Thank you for this opportunity to respond to the release of data on hospital mortality rates for the year of 1987. St. Joseph's Hospital is an 87 bed acute care facility whose case mix includes many patients with major medical and surgical illnesses. We also provide care in specialty units, i.e. ICU, CCU, and Emergency Room.

The Director of Quality Assurance along with the Director of Utilization Management has validated that, with minor exceptions including mortalities for 1988, the data is accurate. The hospital specific mortality data reported by HCFA has been carefully reviewed by: The Hospital President, Chief of the Medical Staff, Physician Chairman of Quality Assurance and Utilization Management. Even though we feel that mortality review is a small part of continuous ongoing monitoring of quality care, our overall percentage of deaths is well within the expected ranges from HCFA.

The Medical Staff of St. Joseph's Hospital conducts an intensive review of the medical record of every patient who expires at this facility regarding medical management and overall quality of care. Mortality review is a continuous process of the Quality Assurance Program. Peer Review activities are an integral part of the monitoring of the healthcare delivery system of this facility. Quality of care review is always by individual case and is conducted in an on-going fashion, not just when statistics, such as the mortality data, are released.

Sincerely,

JoAnne Roach, SC — Oct. 20, 1988
Sr. Jeanne Roach, President — Date

Theodore Waflart, M.D. — 20 Oct 1988
Theodore Waflart, M.D. — Date
Chief of the Medical Staff

ST JOSEPHS MEDICAL CENTER

811 E MADISON ST
SOUTH BEND, IN 46634

Medicare Hospital Provider Number: 150012

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,494	13	10 - 14	3,388	12	10 - 14
Cancer	115	51	33 - 56	127	44	31 - 54
Cerebrovascular Accidents	119	30	17 - 35	128	29	17 - 35
Gastrointestinal Catastrophes	35	46	18 - 55	34	35	18 - 54
Infectious Disease	65	38	25 - 53	46	41	24 - 56
Metabolic/Electrolyte Disorders	89	11	17 - 39	73	21	12 - 38
Pulmonary Disease	163	25	18 - 35	159	25	19 - 36
Renal Failure	32	34	11 - 61	43	40	18 - 67
Severe Acute Heart Disease	137	39	28 - 47	114	39	30 - 50
Severe Chronic Heart Disease	144	24	16 - 32	141	23	16 - 32
Severe Trauma	9	67	6 - 66	8	50	3 - 70
Gastrointestinal Disease	263	2	2 - 6	314	3	1 - 6
Gynecologic Disease	27	0	0 -100	40	2	0 -100
Low-Risk Heart Disease	328	5	1 - 7	311	3	2 - 6
Musculoskeletal/Skin Conditions	444	2	1 - 5	384	3	1 - 6
Neuropsychiatric/Sensory Disease	85	4	1 - 13	97	6	0 - 17
Urologic Disease	102	3	0 - 26	111	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	339
Occupancy Rate (%):	69
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	191
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	17
Registered Nurses:	295
Licensed Practical Nurses:	56

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Saint Joseph's Medical Center

#150012

October 21, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health and Human Services
Washington, D.C. 20201

Dear Dr. Roper:

We wish to comment on the 1987 Medicare mortality statistics provided by the Health Care Administration. The HCFA data appears accurate but it does not reflect the severity of illness of patients served.

The hospital characteristics presented are inaccurate. Our hospital size is understated by more than 100 beds. These mistakes should be corrected before public release of the data.

Hospital characteristics predict severity and, thus, mortality. Saint Joseph's Medical Center is a 339-bed acute care community hospital serving patients with major medical and surgical illnesses, over half of whom are covered by Medicare. We offer specialty care for persons with cancer, heart problems, orthopedic needs and kidney disease. We also have programs for pediatrics and rehabilitation medicine, as well as general medicine and surgery. Our large complement of intensive care beds and our open heart surgery capabilities enable us to treat more severe cases within a given diagnosis.

The actual mortality rate from renal disease is 34%. We are the major kidney treatment center in Northern Indiana, as well as Southwestern Michigan and lower Michigan, serving patients who are in end stages of kidney disease and patients with acute kidney failure.

#150012

Physicians on our medical staff review every death in our facility for appropriateness of care, providing continuous feedback to meet and exceed quality care standards. These standards are established by external licensing and accrediting agencies, as well as members of the Medical Staff consistent with recognized treatment regimens.

Thank you for the opportunity to present this response.

Sincerely,

Dennis W. Heck

Dennis Heck
President

DH/tme

ST MARGARET HOSP AND HEALTH CENTER

5454 HOHMAN AVENUE
HAMMOND, IN 46320

Medicare Hospital Provider Number: 150004

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,397	14	10 - 14	2,844	14	10 - 15
Cancer	112	45	29 - 52	108	34	29 - 51
Cerebrovascular Accidents	137	35	18 - 35	105	31	18 - 37
Gastrointestinal Catastrophes	34	21	23 - 56	33	39	24 - 60
Infectious Disease	58	45	23 - 52	47	36	24 - 56
Metabolic/Electrolyte Disorders	70	26	12 - 39	56	25	13 - 41
Pulmonary Disease	155	30	18 - 35	128	24	17 - 35
Renal Failure	17	47	13 - 70	13	46	11 - 72
Severe Acute Heart Disease	129	48	29 - 48	140	39	29 - 48
Severe Chronic Heart Disease	210	24	15 - 28	160	29	17 - 33
Severe Trauma	11	45	10 - 66	6	17	7 - 71
Gastrointestinal Disease	248	2	1 - 6	201	5	1 - 9
Gynecologic Disease	34	0	0 -100	29	0	0 -100
Low-Risk Heart Disease	410	4	1 - 6	328	4	2 - 7
Musculoskeletal/Skin Conditions	309	2	1 - 6	238	3	1 - 7
Neuropsychiatric/Sensory Disease	98	2	0 - 12	72	1	0 - 17
Urologic Disease	161	2	0 - 10	122	7	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	487
Occupancy Rate (%):	55
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	289
Percent of Physicians Who Are Board Certified Specialists:	61
Interns and Residents:	0
Registered Nurses:	374
Licensed Practical Nurses:	9

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

SAINT MARGARET HOSPITAL

October 18, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Mortality rates for individuals at Saint Margaret Hospital and Health Centers fell within the predicted ranges for the Diagnostic Related Groups (DRG's) researched and released by the Department of Health and Human Sevices. However, in using this report, either to evaluate Saint Margaret Hospital and Health Centers alone or in comparison with others several important factors need to be taken into consideration.

The methodology employed by HCFA has the potential for generating misleading conclusions if used as the sole criteria for evaluating the performance of any health care institution. For example, randomly selected patients were grouped by DRG and ICD-9CM codes. This indicates the presence or absence of co-morbidity, and is at least a symbolic expression of how complex each individual case may be. However, it often fails to provide an accurate picture of acuity.

For example, selected patients included in the data from Saint Margaret Hospital and Health Centers were suffering from end stage renal disease. Although all were listed as "DRG co-morbidity" none were actually listed as end stage renal disease patients. Such reporting distorts a true picture of the mortality rate.

The data for cancer patients need to take into consideration whether a healthcare organization has an established oncology department which could explain increased mortality. Saint Margaret Hospital and Health Centers does have an Oncology Department.

Similarly, the report included in its scope patients who expired within 30 days of discharge. These patients were factored into the morbidity statistics for the DRG for which they were admitted. Such an assumption cannot always necessarily be an accurate reflection of the true situation; i.e. it cannot be assumed that these patients in fact expired due to the same cause or causes for which they were admitted.

These are but three examples of the difficulties one faces in attempting to use the data in this report as the basis for constructing meaningful comparisons and conclusions.

This is not to say the report is without value. It serves to highlight areas that may warrant further investigation. But to rely on this report alone is not a viable course.

Sincerely,

Sister Jane Marie Klein

Sister Jane Marie Klein, O.S.F.
President and Chief Executive Officer

SJM/cb

cc: Sister M. Theresa Solbach
Frank Mutsko
Dr. J. L. Monks
Dr. G. M. Peiffer
Thomas J. Gryzbek
Susan Hallenbeck
Patty Wilson
Patrick McCallig
American Hospital Association
Indiana Hospital Association

ST MARY MEDICAL CENTER

540 TYLER ST
GARY, IN 46402

Medicare Hospital Provider Number: 150034

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,543	11	9 - 13	2,358	12	9 - 14
Cancer	64	48	28 - 55	68	49	28 - 55
Cerebrovascular Accidents	115	23	18 - 35	111	28	17 - 35
Gastrointestinal Catastrophes	13	23	11 - 59	30	30	15 - 52
Infectious Disease	31	42	23 - 60	26	15	20 - 53
Metabolic/Electrolyte Disorders	58	28	19 - 47	52	27	11 - 41
Pulmonary Disease	125	21	18 - 35	107	36	15 - 36
Renal Failure	10	40	13 - 76	21	33	10 - 65
Severe Acute Heart Disease	70	47	26 - 51	72	50	27 - 51
Severe Chronic Heart Disease	133	26	16 - 32	139	20	16 - 32
Severe Trauma	4	50	3 - 82	10	30	9 - 66
Gastrointestinal Disease	189	4	1 - 9	170	2	1 - 7
Gynecologic Disease	9	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	432	2	2 - 5	324	2	1 - 6
Musculoskeletal/Skin Conditions	248	1	1 - 5	241	1	1 - 5
Neuropsychiatric/Sensory Disease	62	2	0 - 25	61	3	0 - 31
Urologic Disease	93	0	0 - 10	82	2	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	349
Occupancy Rate (%):	(not available)
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

540 Tyler Street
Gary, Indiana 46402
(219) 882-9411

St. Mary Medical Center

October 20, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health and Human Services
Washington D.C. 20201

Dear Dr. Roper,

We thank the Health Care Financing Administration for the opportunity to review and respond to the Medicare patients' mortality data for 1987. The hospital acknowledges and supports the Health Care Financing Administration and other reputable and qualified organizations and agencies, such as the American Hospital Association and the Joint Commission on Healthcare Organizations, in their effort to promote consumer awareness and understanding of quality healthcare indicators.

Representative of our commitment to quality health care, St. Mary Medical Center employs its comprehensive Quality Assurance Program to ensure the continuous evaluation of patient care. Our medical staff's peer review of patient mortality data is one component of the program. Because we recognize that mortality rates by themselves are not a complete measure of quality care, we analyze data on all patients, in all circumstances. We believe our program accounts for the unique characteristics of our patients, our hospital, and our community. We consider the information generated by the Health Care Financing Administration one of the tools used to determine quality care.

Allowing for the model's limitations, we believe the data representing St. Mary Medical Center is generally accurate. We have included an addendum of corrections to statistics listed below the mortality data. We recognize the changes the Health Care Financing Administration has made to the model in an effort to make it a more valid assessment of quality care, and we support further progress in this area.

Sincerely,

John R. Birdzell
President

JRB/cfh

ST MARYS HOSP INC

3700 WASHINGTON AVENUE
EVANSVILLE, IN 47715

Medicare Hospital Provider Number: 150100

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,953	12	11 - 15	2,882	12	11 - 15
Cancer	123	41	32 - 54	153	41	34 - 55
Cerebrovascular Accidents	103	33	19 - 39	127	24	20 - 37
Gastrointestinal Catastrophes	37	22	23 - 55	36	39	18 - 54
Infectious Disease	38	18	21 - 51	31	23	20 - 53
Metabolic/Electrolyte Disorders	87	23	19 - 44	25	16	11 - 45
Pulmonary Disease	140	26	16 - 34	140	16	17 - 33
Renal Failure	15	40	18 - 75	16	38	14 - 72
Severe Acute Heart Disease	117	48	25 - 45	114	48	30 - 50
Severe Chronic Heart Disease	140	28	15 - 31	157	23	16 - 31
Severe Trauma	2	50	2 - 92	0	-	-
Gastrointestinal Disease	202	5	1 - 9	170	3	1 - 8
Gynecologic Disease	27	0	0 -100	37	0	0 -100
Low-Risk Heart Disease	333	5	2 - 7	314	2	2 - 6
Musculoskeletal/Skin Conditions	313	3	1 - 6	322	2	1 - 5
Neuropsychiatric/Sensory Disease	112	2	1 - 9	107	3	0 - 14
Urologic Disease	143	1	1 - 7	129	3	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	526
Occupancy Rate (%):	47
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	210
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	15
Registered Nurses:	348
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

When You Need Some Special Care, We'll Be There.

St Mary's Medical Center
3700 Washington Avenue
Evansville, Indiana 47750
812/479-4600

October 19, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Please consider the following to be the response of St. Mary's Medical Center to mortality information forwarded by the Health Care Financing Administration in September, 1988.

Be assured that the quality of the care given to our patients is of paramount importance to St. Mary's Medical Center. Legitimate processes designed to maximize quality of care are welcomed. The information forwarded to us by the Health Care Financing Administration, despite its limitations, has been utilized toward that goal.

The charts of all patients who die at St. Mary's Medical Center are reviewed by the chairman of the involved medical staff department or his designee. Those reviews historically have not revealed any significant evidence of unexpected deaths or quality of care issues.

St. Mary's "actual mortality rates" were within the "predicted mortality rate" ranges in all but one of the 17 categories.

The charts of all patients who died and were classified to the severe acute heart disease category were carefully reviewed by the physician responsible for medical staff quality assessment.

That review revealed that 44.6% of the patients were 75 years of age or older; 26.8% of the patients were 80 years of age or older.

Of those patients who presented to St. Mary's Medical Center with clinical conditions in the severe acute heart disease category, 52.4% lived less than 48 hours; 23.8% lived less than 24 hours. These findings emphasize the severity of the illnesses of the patients in this category.

Fifty percent of the patients falling in this category would have been expected to die based on the clinical findings on presentation. An additional 23.8% of the patients would have had a significant propensity for dying based on the findings on admission.

Only two (4.8%) of the patients died when the findings on admission would not have predicted a significant possibility of death. Critical review of these cases revealed no evidence of a quality of care issue.

A full 33 1/3% of these patients had cardiac or pulmonary arrest prior to admission to the hospital. This finding again emphasizes the severity of the illnesses of the patients in this category.

Sincerely,

Sister Juliana Kelly, D.C.

Sister Juliana Kelly, D.C.
President

ST VINCENT HOSPITAL AND HEALTH CTR

2001 WEST 86TH STREET
INDIANAPOLIS, IN 46207

Medicare Hospital Provider Number: 150084

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	6,939	11	9 - 12	6,411	11	9 - 13
Cancer	254	46	35 - 53	262	46	33 - 52
Cerebrovascular Accidents	167	26	19 - 34	157	20	19 - 34
Gastrointestinal Catastrophes	55	35	19 - 49	46	35	20 - 52
Infectious Disease	59	32	26 - 54	85	38	25 - 51
Metabolic/Electrolyte Disorders	79	22	13 - 39	66	20	13 - 39
Pulmonary Disease	223	27	19 - 35	208	25	18 - 34
Renal Failure	45	47	19 - 66	44	30	18 - 67
Severe Acute Heart Disease	221	40	26 - 42	228	39	29 - 45
Severe Chronic Heart Disease	272	30	18 - 31	266	22	18 - 31
Severe Trauma	9	22	5 - 63	8	13	10 - 65
Gastrointestinal Disease	320	2	1 - 6	297	5	1 - 7
Gynecologic Disease	49	0	0 -100	39	0	0 -100
Low-Risk Heart Disease	1,630	4	2 - 5	1,411	5	2 - 5
Musculoskeletal/Skin Conditions	655	2	1 - 4	632	1	1 - 4
Neuropsychiatric/Sensory Disease	345	1	1 - 6	236	2	0 - 6
Urologic Disease	163	2	0 - 10	153	1	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	820
Ownership/Control:	Church

STAFFING

Interns and Residents:	72
Registered Nurses:	895
Licensed Practical Nurses:	140

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	Yes

St. Vincent
Hospital and
Health Care
Center

A Daughters of
Charity Hospital

2001 West 86th Street
P.O. Box 40970
Indianapolis, Indiana
46240-0970
317-871-2345

October 19, 1988

William L. Roper, M.D., Administrator
Health Care Financing Administration
Health Standards & Quality Bureau
Hospital Mortality Information
P. O. Box 26684 - 6325 Security Blvd.
Baltimore, MD 21207

Dear Dr. Roper:

Thank you for the opportunity to respond to the mortality data regarding Medicare patients treated at St. Vincent Hospital and Health Care Center during 1987. We are pleased to note that in spite of the high acuity level of our patient population, our rates fall within the predicted mortality ranges for all diagnostic categories listed.

In reviewing the St. Vincent mortality data, it is important to consider several significant factors which could impact the reported rates. St. Vincent Hospital and Health Care Center is a tertiary care, major referral center. Included among our services is a large oncology program which includes a comprehensive hospice facility that provides supportive care to patients and their families throughout the death process. It is noted that, of the patients included in the cancer diagnostic mortality list, 43% have benefited from hospice services, many of whom are referred to our program from other facilities.

The Indiana Heart Institute of St. Vincent Hospital is the largest cardiology/cardiovascular surgery program in the state of Indiana. As a major referral center for cardiac-related diagnoses, we receive a high percentage of complicated cases which impact the level of severity in this patient population, and correspondingly, the mortality rates for the cardiac diagnostic categories.

In more general terms, 68% of Medicare patients included in the mortality list were classified as emergency admissions to our facility. Another 22% were transferred to us from another acute care facility or extended care facility. These figures further indicate the severity level/medical status of the patients cared for in St. Vincent Hospital.

Again this year, it is appropriate to emphasize the limitation of evaluating mortality data in isolation. Our comprehensive quality review program continuously monitors many factors related to the quality and appropriateness of the care provided to our patients. Mortality is only one such indicator of the quality of care provided and, unfortunately, in certain situations is an unavoidable outcome.

Thank you again for the opportunity to review and respond to this information.

Sincerely,

Bain J. Farris
President

BJF/jd

STARKE MEMORIAL HOSP

102 EAST CULVER ROAD
KNOX, IN 46534

Medicare Hospital Provider Number: 150102

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	447	13	9 - 16	451	12	8 - 15
Cancer	10	60	19 - 75	8	75	18 - 75
Cerebrovascular Accidents	22	18	14 - 48	19	11	11 - 43
Gastrointestinal Catastrophes	2	0	3 - 88	3	0	3 - 79
Infectious Disease	4	25	2 - 80	4	50	4 - 82
Metabolic/Electrolyte Disorders	13	46	9 - 62	9	33	7 - 66
Pulmonary Disease	40	25	11 - 40	26	23	10 - 44
Renal Failure	5	80	21 - 93	3	67	9 - 91
Severe Acute Heart Disease	13	31	15 - 63	14	64	19 - 67
Severe Chronic Heart Disease	19	21	10 - 48	33	30	11 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	25	4	0 - 90	48	2	0 - 19
Gynecologic Disease	6	0	0 - 94	4	0	0 -100
Low-Risk Heart Disease	42	0	0 - 14	50	6	0 - 42
Musculoskeletal/Skin Conditions	42	5	0 - 82	50	2	0 - 22
Neuropsychiatric/Sensory Disease	9	0	0 -100	6	0	0 -100
Urologic Disease	29	3	0 - 68	23	4	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	51
Occupancy Rate (%):	52
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	31
Percent of Physicians Who Are Board Certified Specialists:	39
Interns and Residents:	0
Registered Nurses:	44
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Starke Memorial Hospital
102 E. Culver Rd. • Knox, Indiana 46534 • (219) 772-6231

October 13, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

We have reviewed the Medicare Mortality Data for patients who's last discharge in 1987 was from Starke Memorial Hospital and who died within thirty days of discharge date. I would like to offer these comments and corrections.

To correct the summary sheet, Starke Memorial Hospital does have a combined coronary care/intensive care unit. We also offer Hospice Care through Starke Home Health Care Services.

Of the 59 deaths, we have initially divided them into two groups: Twenty-two patients died outside of the hospital. Thirteen expired in a nursing home setting, seven expired at home, and two expired at VA Hospitals. We do not feel that the VA deaths should be attributed to our mortality statistics since they were in a different hospital at the time of death [redacted]

Upon review of the 37 who died at Starke Memorial Hospital, 25 had made arrangements or had expressed wishes for no heroic or extraordinary measures. Thus, there mortality was expected. These patients shared no similar clinical characteristics, related diagnoses, a similar treatment. There care was not of a particular physician or group of physicians. There was no discernable pattern.

There were 12 deaths in which heroic measures were performed. Again, there was no related diagnoses, treatment patterns or physician group. They were all reviewed by the Medical Staff and appropriate care was delivered. None of our actual mortality rates were greater than the predicted range. On a case by case review, the Medical Staff felt that the care for each of these patients were reasonable and within existing norms.

Sincerely,

Spencer L. Grover
Executive Director

SLG;hb

TERRE HAUTE REGIONAL HOSP

601 HOSPITAL LANE
TERRE HAUTE, IN 47802

Medicare Hospital Provider Number: 150046

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,414	12	10 - 15	1,359	11	10 - 15
Cancer	67	43	37 - 64	78	45	32 - 58
Cerebrovascular Accidents	31	42	12 - 47	44	27	17 - 44
Gastrointestinal Catastrophes	9	33	12 - 70	4	50	6 - 83
Infectious Disease	15	33	14 - 61	7	29	11 - 73
Metabolic/Electrolyte Disorders	8	25	5 - 66	25	16	13 - 47
Pulmonary Disease	59	25	14 - 39	62	26	15 - 40
Renal Failure	1	100	1 - 97	3	67	1 - 90
Severe Acute Heart Disease	72	33	27 - 50	63	40	30 - 55
Severe Chronic Heart Disease	67	16	14 - 34	64	27	14 - 36
Severe Trauma	5	20	6 - 75	1	100	2 - 97
Gastrointestinal Disease	84	4	0 - 14	101	1	1 - 8
Gynecologic Disease	14	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	256	4	2 - 7	212	4	2 - 8
Musculoskeletal/Skin Conditions	121	1	1 - 7	113	1	0 - 7
Neuropsychiatric/Sensory Disease	129	2	0 - 13	123	1	0 - 9
Urologic Disease	40	0	0 - 40	29	0	0 - 29

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	284
Occupancy Rate (%):	43
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	87
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	225
Licensed Practical Nurses:	41

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

THE COMMUNITY HOSPITAL

901 MACARTUR BOULEVARD
MUNSTER, IN 46321

Medicare Hospital Provider Number: 150125

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,380	10	8 - 12	1,928	13	9 - 13
Cancer	49	31	25 - 54	42	62	26 - 57
Cerebrovascular Accidents	71	17	14 - 34	72	35	16 - 40
Gastrointestinal Catastrophes	15	47	13 - 63	15	60	15 - 64
Infectious Disease	21	43	16 - 59	12	67	16 - 68
Metabolic/Electrolyte Disorders	41	37	9 - 44	24	42	10 - 52
Pulmonary Disease	108	25	16 - 36	88	18	15 - 35
Renal Failure	4	50	6 - 85	6	83	9 - 76
Severe Acute Heart Disease	89	35	24 - 46	102	38	26 - 47
Severe Chronic Heart Disease	151	21	14 - 29	126	29	14 - 31
Severe Trauma	4	25	7 - 81	1	0	0 - 98
Gastrointestinal Disease	191	1	1 - 6	190	1	1 - 6
Gynecologic Disease	39	0	0 -100	30	0	0 -100
Low-Risk Heart Disease	422	5	1 - 6	277	2	1 - 6
Musculoskeletal/Skin Conditions	201	4	0 - 10	159	4	0 - 10
Neuropsychiatric/Sensory Disease	42	5	0 - 53	20	5	0 - 64
Urologic Disease	115	1	0 - 10	110	1	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	245
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

THE KINGS DAUGHTERS HOSPITAL

112 PRESBYTERIAN AVE
MADISON, IN 47250

Medicare Hospital Provider Number: 150069

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,480	15	12 - 17	1,516	15	11 - 16
Cancer	22	55	22 - 63	25	44	24 - 63
Cerebrovascular Accidents	97	24	18 - 37	80	17	17 - 36
Gastrointestinal Catastrophes	15	40	16 - 65	13	23	14 - 62
Infectious Disease	19	26	14 - 55	21	38	17 - 59
Metabolic/Electrolyte Disorders	62	6	11 - 34	61	7	10 - 33
Pulmonary Disease	166	31	17 - 34	135	26	15 - 33
Renal Failure	3	33	5 - 88	6	67	11 - 82
Severe Acute Heart Disease	83	45	28 - 51	100	50	29 - 51
Severe Chronic Heart Disease	97	24	15 - 33	111	30	15 - 34
Severe Trauma	2	0	1 - 91	1	0	0 - 98
Gastrointestinal Disease	118	1	1 - 7	118	1	1 - 7
Gynecologic Disease	12	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	172	3	1 - 8	168	2	1 - 7
Musculoskeletal/Skin Conditions	72	3	0 - 14	124	2	1 - 8
Neuropsychiatric/Sensory Disease	32	9	0 - 68	33	3	0 - 60
Urologic Disease	63	0	0 - 13	61	7	0 - 62

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	142
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	38
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	0
Registered Nurses:	56
Licensed Practical Nurses:	31

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

THE LUTHERAN HOSP OF FORT WAYNE

3024 FAIRFIELD AVE
FORT WAYNE, IN 46807

Medicare Hospital Provider Number: 150017

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,750	11	9 - 13	3,752	11	9 - 13
Cancer	123	29	27 - 48	134	39	30 - 52
Cerebrovascular Accidents	128	29	18 - 36	137	26	19 - 36
Gastrointestinal Catastrophes	28	46	20 - 60	44	41	20 - 54
Infectious Disease	46	30	23 - 53	25	24	17 - 53
Metabolic/Electrolyte Disorders	39	36	13 - 48	45	13	12 - 39
Pulmonary Disease	142	25	18 - 35	135	24	15 - 33
Renal Failure	59	31	12 - 58	48	19	16 - 63
Severe Acute Heart Disease	142	39	28 - 46	132	41	29 - 48
Severe Chronic Heart Disease	163	27	14 - 30	178	30	17 - 32
Severe Trauma	8	25	5 - 66	12	50	6 - 63
Gastrointestinal Disease	228	3	2 - 8	216	3	1 - 7
Gynecologic Disease	40	0	0 - 92	41	0	0 - 82
Low-Risk Heart Disease	491	4	2 - 6	540	4	2 - 6
Musculoskeletal/Skin Conditions	455	2	1 - 5	475	2	1 - 5
Neuropsychiatric/Sensory Disease	203	2	0 - 8	176	1	0 - 7
Urologic Disease	159	1	0 - 8	140	3	1 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	425
Occupancy Rate (%):	79
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	171
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	8
Registered Nurses:	494
Licensed Practical Nurses:	68

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

the lutheran hospital of fort wayne, inc

3024 FAIRFIELD AVENUE • PHONE 456-2001 • FORT WAYNE, INDIANA 46807

October 24, 1988

Mrs. Sandra Kappert
Health Standards & Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

The following information for The Lutheran Hospital of Indiana, Inc., is to be attached to the Hospital Specific Report for the 1987 review period, prior to public disclosure.

The Lutheran Hospital of Indiana, Inc., is a 425 bed acute care facility whose case load reflects an intense mix of critically ill medical and surgical patients. The Lutheran Hospital of Indiana, Inc., is a full service hospital offering care in the specialty areas of heart disease, including heart transplantation, kidney disease, orthopedics, oncology and the neuro sciences, as well as general medicine and surgery.

After careful review of the information to be published, we would first like to note that the hospital description to be included in the mortality data release incorrectly identifies Lutheran as a 276 bed facility.

In our evaluation of the hospital specific mortality data, we maintain that this information can only be properly interpreted in conjunction with our ongoing case review process. The medical staff at The Lutheran Hospital of Indiana, Inc., conducts an intensive review of the medical management and care of every patient who dies at this facility. Mortality review is a component of the ongoing Quality Assurance Program and, combined with peer review, is an integral part of monitoring the health care delivery system at the hospital. It is in this kind of individual case review that the quality of care is thoroughly evaluated. However, aggregate statistics, such as the mortality data, can be useful in suggesting areas for quality review.

The medical and hospital staff, as has been their practice, will continue to review all cases, including mortality cases, for quality and appropriateness of care. This review practice reflects The Lutheran Hospital of Indiana, Inc., continuing mission to identify opportunities to improve patient care.

Respectfully,

William W. Wissman

William W. Wissman
Vice President

WWW:gv

THE METHODIST HOSPITAL OF GARY INC

600 GRANT ST
GARY, IN 46402

Medicare Hospital Provider Number: 150002

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,142	10	9 - 14	1,058	13	9 - 15
Cancer	30	60	27 - 63	27	41	25 - 63
Cerebrovascular Accidents	48	27	16 - 42	43	28	13 - 41
Gastrointestinal Catastrophes	4	75	5 - 80	17	41	12 - 59
Infectious Disease	16	19	17 - 58	7	57	8 - 73
Metabolic/Electrolyte Disorders	21	19	11 - 50	24	29	10 - 50
Pulmonary Disease	44	23	18 - 45	48	29	15 - 43
Renal Failure	12	8	14 - 66	10	30	13 - 76
Severe Acute Heart Disease	30	33	20 - 54	41	56	28 - 59
Severe Chronic Heart Disease	75	13	13 - 30	68	15	15 - 34
Severe Trauma	2	50	0 - 95	2	0	1 - 91
Gastrointestinal Disease	65	8	0 - 24	40	10	0 - 52
Gynecologic Disease	12	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	158	3	1 - 8	141	3	1 - 8
Musculoskeletal/Skin Conditions	74	3	0 - 16	69	0	0 - 10
Neuropsychiatric/Sensory Disease	84	2	0 - 13	98	0	0 - 9
Urologic Disease	48	0	0 - 36	47	6	0 - 40

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	617
Occupancy Rate (%):	67
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	319
Percent of Physicians Who Are Board Certified Specialists:	60
Interns and Residents:	10
Registered Nurses:	493
Licensed Practical Nurses:	76

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

THE METHODIST HOSPITALS

Northlake Campus
Corporate Office
600 Grant St.
Gary, IN 46402
(219) 886-4000

Southlake Campus
8701 Broadway
Merrillville, IN 46410
(219) 738-5500

Provider #15-0002 Provider #15-0132

October 20, 1988

William L. Roper, M.D.
Administrator
c/o Ms. Sandra Kappert
Department of Health and Human Services
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

The following comments are in response to your September 16, 1988 communication regarding the intended release of mortality rate data for 1987 and the recalculation of data for 1986.

The Methodist Hospitals serve as a regional referral center for communities throughout Northwest Indiana. A wide range of diagnostic and treatment capabilities attract physicians and their patients to the hospital.

All deaths included in the 1987 HCFA mortality analysis for the Northlake and Southlake Campuses have been verified as deaths of patients who had been hospitalized at the Methodist Hospitals. The hospital has a well-established quality assurance process which includes mortality review. All deaths are reviewed from a nursing and physician standpoint to evaluate the quality of patient care management.

It is significant that the leading causes of deaths listed are consistent with those of the nation and the state. The leading causes of death for the State of Indiana in 1986 (most recent data) were diseases of the heart (1), cancer (2) and cerebrovascular disease (3). In reviewing the Methodist Hospitals data, the leading causes of death are the same - consistent with both state and national data.

Our review of The Methodist Hospital medical records for those deaths included in the 1987 HCFA analysis found:

1. Over 75% of the patients had one or more co-existing medical conditions in addition to that condition which necessitated their hospitalization. This is a significant percentage and is consistent with the hospital's role as a regional referral center for cardiovascular disease, cancer, renal disease, pulmonary disease, etc.

2. More than 50% of the patients presented at the Emergency Room and were subsequently admitted to an acute care unit.

3. More than 90% of the patient admissions were classified as urgent or emergency admissions.

The hospital strives to meet the healthcare needs of the community with a spectrum of services for those who are ambulatory to those who are critically ill. The increasingly aging population of the Northwest Indiana communities allows us to serve a significant percentage of Medicare patients - 23.2% of all Lake County residents ages 65 or older.

Because the data presented for each hospital is hospital - specific and considers the specific patient population of the hospital and hospital services provided, it will be of little value to consumers to compare hospitals on the basis of the data presented. Mortality is but one of the many factors which enter into an assessment of hospital performance.

Until the measures to be used by consumers, hospitals and Peer Review Organizations for the determination of the presence or absence of quality care are defined, the assessment of quality from models currently in use is limited. Thus, Medicare recipients are encouraged to discuss the mortality data with their physicians for a better understanding of factors influencing quality of care rendered in a hospital setting.

Thank you for the opportunity to comment.

Sincerely yours,

John H. Betjemann
President

Veera Porapaiboon, M.D.
President, Medical Staff

JHB/VP/dg
0088G

TIPTON COUNTY MEMORIAL HOSPITAL

1000 SOUTH MAIN STREET
TIPTON, IN 46072

Medicare Hospital Provider Number: 150053

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	569	13	8 - 15	617	12	9 - 15
Cancer	9	78	28 - 81	10	70	21 - 75
Cerebrovascular Accidents	19	42	8 - 52	24	33	10 - 48
Gastrointestinal Catastrophes	3	100	10 - 83	7	14	5 - 65
Infectious Disease	9	22	7 - 63	6	67	15 - 81
Metabolic/Electrolyte Disorders	21	10	11 - 44	21	19	9 - 47
Pulmonary Disease	21	24	9 - 47	33	24	14 - 45
Renal Failure	3	67	11 - 94	1	0	3 - 99
Severe Acute Heart Disease	17	47	19 - 64	20	50	18 - 60
Severe Chronic Heart Disease	40	20	11 - 37	44	20	16 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	62	0	1 - 9	65	3	0 - 22
Gynecologic Disease	6	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	77	4	0 - 15	88	1	1 - 9
Musculoskeletal/Skin Conditions	33	3	0 - 84	36	0	0 - 33
Neuropsychiatric/Sensory Disease	20	5	0 - 75	16	0	0 - 57
Urologic Disease	22	5	0 - 73	17	0	0 - 42

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	136
Occupancy Rate (%):	35
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	16
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	0
Registered Nurses:	73
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

UNION CITY MEMORIAL HOSPITAL

900 NORTH COLUMBIA ST
UNION CITY, IN 47390

Medicare Hospital Provider Number: 150085

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	144	19	9 - 23	162	10	8 - 19
Cancer	2	100	8 - 92	2	100	8 - 91
Cerebrovascular Accidents	8	0	9 - 50	11	9	11 - 53
Gastrointestinal Catastrophes	0	-	-	1	100	1 - 97
Infectious Disease	3	33	4 - 86	2	0	2 - 88
Metabolic/Electrolyte Disorders	5	20	2 - 75	11	9	3 - 51
Pulmonary Disease	28	21	11 - 43	16	6	9 - 41
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	9	89	18 - 65	10	80	22 - 72
Severe Chronic Heart Disease	7	43	3 - 71	9	11	3 - 55
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	12	0	0 - 49	3	0	0 -100
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	13	8	0 - 99	23	0	0 - 44
Musculoskeletal/Skin Conditions	11	9	0 - 97	10	0	0 - 99
Neuropsychiatric/Sensory Disease	4	25	0 -100	5	0	0 -100
Urologic Disease	2	0	0 -100	5	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	26
Occupancy Rate (%):	35
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	4
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	0
Registered Nurses:	12
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

UNION HOSPITAL INC

1606 N 7TH ST
TERRE HAUTE, IN 47801

Medicare Hospital Provider Number: 150023

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,123	13	10 - 14	2,985	15	11 - 15
Cancer	126	40	29 - 51	121	45	31 - 53
Cerebrovascular Accidents	138	18	19 - 34	132	39	19 - 38
Gastrointestinal Catastrophes	25	32	16 - 55	28	32	20 - 58
Infectious Disease	45	31	19 - 50	63	32	23 - 52
Metabolic/Electrolyte Disorders	49	37	13 - 45	36	36	12 - 47
Pulmonary Disease	149	25	16 - 33	167	22	16 - 32
Renal Failure	18	39	20 - 75	12	33	13 - 74
Severe Acute Heart Disease	145	43	29 - 48	138	42	31 - 50
Severe Chronic Heart Disease	191	22	15 - 29	174	28	15 - 30
Severe Trauma	6	33	6 - 74	8	38	5 - 69
Gastrointestinal Disease	265	3	2 - 7	233	4	1 - 8
Gynecologic Disease	40	2	0 -100	52	0	0 -100
Low-Risk Heart Disease	391	3	2 - 6	365	2	2 - 6
Musculoskeletal/Skin Conditions	248	2	1 - 6	226	3	1 - 7
Neuropsychiatric/Sensory Disease	81	5	0 - 26	74	5	0 - 31
Urologic Disease	119	1	0 - 8	128	2	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	288
Occupancy Rate (%):	76
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	96
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	12
Registered Nurses:	365
Licensed Practical Nurses:	85

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No



October 21, 1988

Dr. William L. Roper, Administrator
Health Care Financing Administration
Department of Health and Human Services
Attn: HSQ-148-GNC
Washington, D.C. 20201

Dear Dr. Roper:

Union Hospital, Inc. would like to take this opportunity to provide comment on the 1987 Mortality Data Release by HCFA. It is our understanding that this information will be made available and published with our Mortality Data when it is released.

Union Hospital is a 354-bed acute and specialty care referral hospital for the area. Approximately, 45% of our admissions are of an emergency nature or are transferred from another facility. Approximately, 55% of our patient days are for Medicare patients and nearly half of those are for patients who are 70 years of age or older.

Union Hospital, its Board and Medical Staff have always held quality patient care to be of primary importance. Our Medical Staff reviews all patient care provided at the Hospital. This Quality Assurance process involves the use of numerous indicators, including mortality data, in order to identify any problems in patient care. Additionally, all patient deaths occuring at Union Hospital are screened by applying criteria developed and approved by the Medical Staff. Any chart not meeting this criteria is reviewed by the appropriate Medical Staff Department to identify any deficiencies in medical management. These ongoing reviews have not revealed any pattern of inappropriate care.

It is important to understand that no single indicator, such as mortality data, can accurately measure quality care. From our experience, we realize that it is extremely important to consider all aspects of patient care and not to place excessive emphasis on any particular indicator. Although our overall mortality rate is within the predicted range, we recognize that this indicator by itself, is not a reliable measure of the quality of care provided at Union Hospital or any other Hospital for that matter.

Single indicators, such as the mortality data being presented, are limited in their use. As with any statistical information, it is important to understand the methodology in order to interpret the results. This mortality data is an example of the inherent shortcomings of the methodology used in its calculation. It is severely limited by its inability to measure such clinically pertinent factors as severity-of-illness upon admission and pertinent demographic information.

While the mortality data does provide information that can be trended, and can be used to help director and assist us in our ongoing patient care evaluations, it is not by itself a reliable or even accurate measure of the care provided. It may be considered only as a part of a much broader process.

We appreciate the opportunity to comment on the mortality data.

Sincerely,

UNION HOSPITAL, INC.

David R Doerr

David R. Doerr
Vice President

DRD/sjr

UNIVERSITY HEIGHTS HOSP

1402 E COUNTY LINE RD SOUTH
INDIANAPOLIS, IN 46227

Medicare Hospital Provider Number: 150128

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	960	14	9 - 15	822	12	9 - 15
Cancer	19	32	16 - 59	21	43	25 - 67
Cerebrovascular Accidents	46	35	16 - 44	25	28	11 - 47
Gastrointestinal Catastrophes	6	67	6 - 74	6	0	7 - 60
Infectious Disease	19	58	16 - 61	18	17	16 - 55
Metabolic/Electrolyte Disorders	27	19	11 - 46	17	24	5 - 51
Pulmonary Disease	59	36	15 - 41	64	31	14 - 39
Renal Failure	2	100	8 - 92	3	100	14 - 89
Severe Acute Heart Disease	30	40	24 - 59	27	44	23 - 60
Severe Chronic Heart Disease	50	18	16 - 39	41	27	13 - 41
Severe Trauma	1	0	1 - 97	1	0	0 - 99
Gastrointestinal Disease	77	1	0 - 11	57	4	1 - 16
Gynecologic Disease	19	0	0 - 47	10	0	0 -100
Low-Risk Heart Disease	74	1	1 - 10	68	1	1 - 11
Musculoskeletal/Skin Conditions	105	2	1 - 9	92	3	0 - 19
Neuropsychiatric/Sensory Disease	23	0	0 - 68	26	0	0 - 44
Urologic Disease	46	2	0 - 25	35	0	0 - 39

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	110
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	125
Percent of Physicians Who Are Board Certified Specialists:	36
Interns and Residents:	0
Registered Nurses:	98
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

VERMILLION COUNTY HOSPITAL

801 SOUTH MAIN STREET
CLINTON, IN 47842

Medicare Hospital Provider Number: 150060

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	638	17	11 - 18	624	17	12 - 19
Cancer	18	56	17 - 61	13	69	24 - 72
Cerebrovascular Accidents	35	31	13 - 44	41	29	12 - 41
Gastrointestinal Catastrophes	6	67	8 - 75	3	33	3 - 86
Infectious Disease	13	23	14 - 61	11	36	13 - 67
Metabolic/Electrolyte Disorders	13	31	9 - 59	18	17	6 - 47
Pulmonary Disease	56	30	14 - 40	51	22	13 - 38
Renal Failure	8	50	12 - 79	3	67	7 - 90
Severe Acute Heart Disease	37	35	23 - 55	49	39	27 - 56
Severe Chronic Heart Disease	46	20	12 - 36	42	26	13 - 41
Severe Trauma	0	-	-	1	0	1 - 97
Gastrointestinal Disease	35	17	0 - 90	33	3	0 - 39
Gynecologic Disease	4	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	73	1	1 - 10	52	0	1 - 10
Musculoskeletal/Skin Conditions	37	3	0 - 40	33	0	0 - 26
Neuropsychiatric/Sensory Disease	15	7	0 - 92	16	0	0 - 99
Urologic Disease	21	0	0 - 87	15	20	0 - 96

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	56
Occupancy Rate (%):	52
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	16
Percent of Physicians Who Are Board Certified Specialists:	56
Interns and Residents:	0
Registered Nurses:	35
Licensed Practical Nurses:	22

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

VERMILLION COUNTY HOSPITAL

801 South Main St., Clinton, IN 47842
317-832-2451
Toll Free 800-338-2996

Dedicated to
Service Since 1924

October 20, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

The Vermillion County Hospital in Clinton, Indiana has received Medicare Mortality Data for 1986 and 1987 calendar years that we feel are misleading and inaccurate. The public should know this data has errors in it and in no way reflects on the quality of care received at my hospital.

First of all, there are errors in the bedside that HCFA thinks VCH operates. HCFA doesn't have the correct bed-size for VCH. Also, 1986 data sent to VCH was changed and VCH has no knowledge that those changes are correct.

Secondly, the sample size of VCH is so small that no one can draw conclusions from samples that are very small. At VCH some of the categories analyzed by HCFA had only 4 patients included!

Thirdly, the "predicting" of mortality-death rates by diagnosis is not possible. Patients are all different and who can explain why one patient dies and another lives when two similar patients have the same diagnosis? Predicting death rates might be a good computer game but does not apply for physicians who treat patients to recover.

Finally, there are not enough factors considered by HCFA that complicate the "predicting" of patients' deaths. Social and economic factors as well as clinical factors do play a role in patient outcomes, especially if patients don't have enough income to see their doctor regularly and problems/complications result. Patients who live where there are less doctors also will not as likely see the doctor as often as in other areas where there are more doctors. In rural settings, going to the doctor can be a much greater problem than in urban areas.

Sincerely,

Don Brawley

Don Brawley
Administrator

DB/bs

WABASH COUNTY HOSPITAL

670 NE STREET PO BOX548
WABASH, IN 46992

Medicare Hospital Provider Number: 150105

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	593	16	10 - 17	599	14	10 - 17
Cancer	11	36	12 - 65	6	33	12 - 77
Cerebrovascular Accidents	24	25	13 - 48	41	32	14 - 43
Gastrointestinal Catastrophes	5	60	6 - 78	4	25	4 - 80
Infectious Disease	9	44	9 - 68	4	0	17 - 80
Metabolic/Electrolyte Disorders	23	26	6 - 47	18	28	7 - 52
Pulmonary Disease	74	24	12 - 35	82	21	14 - 34
Renal Failure	3	67	9 - 91	5	0	25 - 88
Severe Acute Heart Disease	32	50	23 - 57	20	40	23 - 64
Severe Chronic Heart Disease	44	27	13 - 40	31	29	13 - 45
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	56	0	1 - 10	57	4	0 - 18
Gynecologic Disease	8	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	50	6	0 - 30	56	4	1 - 16
Musculoskeletal/Skin Conditions	30	0	0 - 24	38	3	0 - 47
Neuropsychiatric/Sensory Disease	6	0	0 -100	10	0	0 -100
Urologic Disease	14	14	0 - 98	19	5	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	92
Occupancy Rate (%):	62
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	37
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	57
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WARRICK HOSPITAL INC

1116 MILLIS AVENUE
BOONVILLE, IN 47601

Medicare Hospital Provider Number: 150130

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	322	15	13 - 21	317	15	10 - 19
Cancer	10	40	15 - 71	2	0	1 - 90
Cerebrovascular Accidents	19	26	12 - 52	18	17	13 - 50
Gastrointestinal Catastrophes	1	0	0 - 98	4	25	5 - 80
Infectious Disease	13	31	13 - 63	7	57	13 - 77
Metabolic/Electrolyte Disorders	13	31	5 - 58	7	14	4 - 64
Pulmonary Disease	35	31	17 - 49	25	36	14 - 52
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	13	46	22 - 72	17	35	22 - 66
Severe Chronic Heart Disease	26	8	11 - 35	20	40	10 - 52
Severe Trauma	1	0	0 - 99	1	0	2 - 97
Gastrointestinal Disease	23	9	0 - 61	25	0	0 - 42
Gynecologic Disease	4	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	37	0	1 - 15	41	0	1 - 12
Musculoskeletal/Skin Conditions	21	0	0 - 47	14	0	0 - 84
Neuropsychiatric/Sensory Disease	4	0	0 -100	5	0	0 -100
Urologic Disease	8	13	0 -100	13	0	0 - 66

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	41
Occupancy Rate (%):	41
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	14
Percent of Physicians Who Are Board Certified Specialists:	50
Interns and Residents:	0
Registered Nurses:	29
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WASHINGTON COUNTY MEMORIAL HOSPITAL

911 N SHELBY ST
SALEM, IN 47167

Medicare Hospital Provider Number: 150098

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	384	20	10 - 19	394	16	11 - 19
Cancer	7	86	21 - 76	8	63	18 - 78
Cerebrovascular Accidents	30	50	14 - 50	29	31	15 - 49
Gastrointestinal Catastrophes	1	0	3 - 98	3	0	5 - 79
Infectious Disease	1	100	2 - 97	0	-	-
Metabolic/Electrolyte Disorders	3	33	0 - 91	4	25	1 - 86
Pulmonary Disease	45	18	14 - 39	41	27	15 - 44
Renal Failure	4	75	14 - 90	5	80	10 - 81
Severe Acute Heart Disease	27	56	22 - 59	26	38	24 - 61
Severe Chronic Heart Disease	18	17	8 - 46	24	29	8 - 46
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	28	4	0 - 70	36	3	0 - 28
Gynecologic Disease	6	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	54	9	0 - 34	54	4	1 - 18
Musculoskeletal/Skin Conditions	19	11	0 -100	21	0	0 - 91
Neuropsychiatric/Sensory Disease	10	0	0 - 92	7	14	0 -100
Urologic Disease	20	10	0 - 95	15	7	0 - 77

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	75
Occupancy Rate (%):	27
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	11
Percent of Physicians Who Are Board Certified Specialists:	55
Interns and Residents:	0
Registered Nurses:	26
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WELBORN MEMORIAL BAPTIST HOSP INC

401 SOUTHEAST 6TH ST
EVANSVILLE, IN 47713

Medicare Hospital Provider Number: 150025

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,281	13	9 - 13	2,044	12	9 - 14
Cancer	111	43	26 - 49	106	27	26 - 48
Cerebrovascular Accidents	70	21	14 - 35	82	30	17 - 38
Gastrointestinal Catastrophes	19	47	19 - 64	20	45	13 - 57
Infectious Disease	24	54	18 - 59	26	42	17 - 57
Metabolic/Electrolyte Disorders	32	25	10 - 45	58	17	14 - 40
Pulmonary Disease	94	33	14 - 35	78	24	12 - 34
Renal Failure	13	38	14 - 73	15	33	12 - 70
Severe Acute Heart Disease	112	36	27 - 47	96	41	25 - 47
Severe Chronic Heart Disease	86	21	12 - 31	73	18	14 - 33
Severe Trauma	4	50	1 - 86	8	13	8 - 63
Gastrointestinal Disease	211	2	1 - 7	150	4	0 - 11
Gynecologic Disease	35	0	0 - 47	40	0	0 -100
Low-Risk Heart Disease	293	5	1 - 7	252	5	1 - 8
Musculoskeletal/Skin Conditions	187	1	0 - 6	171	3	0 - 9
Neuropsychiatric/Sensory Disease	72	3	0 - 21	51	2	0 - 23
Urologic Disease	106	4	0 - 39	124	0	0 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	338
Occupancy Rate (%):	59
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	213
Percent of Physicians Who Are Board Certified Specialists:	93
Interns and Residents:	1
Registered Nurses:	351
Licensed Practical Nurses:	37

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

WELBORN
Baptist Hospital

October 21, 1988

Hospital 150025

Health Standards and Quality Bureau
HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21270

RE: 1987 Mortality Statistics

Dear Mrs. Kappert:

Thank you for the opportunity to append the 1987 mortality statistics describing the Medicare population treated at Welborn Baptist Hospital.

Although the overall mortality rate of 13% falls within the predicted range for this hospital, we feel that mortality statistics alone, without account of the severity of illness of the individual patients within a disease category, is too incomplete a criterion to be used in assessing the quality of care provided by an institution. In addition, if the 40% of the 1987 Medicare stays not presently included in the statistics were included in this number, the overall mortality rate at Welborn would be more accurately counted at 8.2%, or below predicted range.

As information regarding 1987 death rates calculated by our own state's Bureau of Vital Records is not yet available, it is difficult for this hospital to determine whether the "expected range" as calculated by your agency describes prudent expectations.

Medicare, by eligibility, is limited to the aged or disabled; a population in which death is not unexpected. Twenty-three (23) percent of the patients included in the mortality statistics died thirty days following their discharge from Welborn; of those patients, 38% were discharged to a nursing home, 21% to a hospice program. At the time of discharge from the hospital, the patients met Medicare's own stated criteria to assure that patients are discharged from the hospital in a stable condition.

Welborn Baptist Hospital is a referral institution with an active helicopter transport program delivering many critical trauma cases; however, most are not in the Medicare (over 65 years) age group. Because of the small Medicare population in the trauma category, the two patients who expired are reflected in a superficially high statistic.

Mrs. Sandra Kappert
October 21, 1988

As we indicated to your staff at the time the mortality statistics were released to the hospital, the information contained in the "hospital characteristics" section is inaccurate. The information was taken from a 1986 American Hospital Association survey, and unfortunately, your computer program which selected information selected incorrect fields. We have been told by your Office that when released to the public in December, the erroneous information will be replaced by information from the 1987 survey, hopefully from the correct fields of information. At that time, we were also informed that the 1987 data would not be available for our review prior to its release, therefore, we can not attest to its accuracy or completeness at this time. Our concern regarding its accuracy, in light of the information it replaces, is understandable. We would expect it to show the information we reported in that survey, or 493 licensed beds served by a Medical Staff of whom 81% hold Board Certification in their respective specialities.

As a part of our Quality Assurance Program, Welborn Baptist Hospital Medical Staff continues to conduct an ongoing review of every death occurring at this facility. This monitoring mechanism provides us with continuous feedback and assistance in meeting and exceeding quality of care standards.

Sincerely,

Marjorie Z. Soyugenc/se

Marjorie Z. Soyugenc
President
Welborn Baptist Hospital

WELLS COMMUNITY HOSPITAL

1100 SOUTH MAIN STREET
BLUFFTON, IN 46714

Medicare Hospital Provider Number: 150063

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	361	12	10 - 17	410	12	11 - 18
Cancer	11	64	19 - 72	11	36	22 - 75
Cerebrovascular Accidents	20	35	12 - 53	22	36	13 - 52
Gastrointestinal Catastrophes	3	0	5 - 79	4	25	9 - 82
Infectious Disease	4	25	8 - 82	4	25	5 - 80
Metabolic/Electrolyte Disorders	6	0	3 - 59	5	0	4 - 64
Pulmonary Disease	25	20	14 - 47	28	32	12 - 48
Renal Failure	3	67	8 - 90	2	100	11 - 98
Severe Acute Heart Disease	14	29	16 - 62	16	38	18 - 63
Severe Chronic Heart Disease	23	17	8 - 41	30	17	13 - 41
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	36	0	1 - 16	32	0	0 - 25
Gynecologic Disease	6	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	25	4	0 - 44	28	0	1 - 19
Musculoskeletal/Skin Conditions	26	0	1 - 22	24	4	0 - 51
Neuropsychiatric/Sensory Disease	10	0	0 -100	11	0	0 - 87
Urologic Disease	18	6	0 - 90	21	0	0 - 77

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	45
Occupancy Rate (%):	33
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	17
Percent of Physicians Who Are Board Certified Specialists:	47
Interns and Residents:	0
Registered Nurses:	34
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WESTVIEW HOSPITAL

3630 GUION RD
INDIANAPOLIS, IN 46222

Medicare Hospital Provider Number: 150129

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	623	9	9 - 15	651	10	8 - 14
Cancer	13	23	19 - 65	15	67	26 - 72
Cerebrovascular Accidents	19	21	10 - 48	13	23	11 - 57
Gastrointestinal Catastrophes	4	50	7 - 83	1	100	1 - 97
Infectious Disease	17	59	15 - 61	18	39	19 - 64
Metabolic/Electrolyte Disorders	6	0	4 - 59	16	13	10 - 49
Pulmonary Disease	50	20	17 - 41	31	23	11 - 43
Renal Failure	4	50	9 - 87	4	50	15 - 95
Severe Acute Heart Disease	17	41	18 - 63	14	29	16 - 62
Severe Chronic Heart Disease	37	16	10 - 36	30	27	10 - 42
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	44	0	1 - 13	38	5	0 - 45
Gynecologic Disease	7	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	66	3	1 - 14	84	1	1 - 9
Musculoskeletal/Skin Conditions	87	0	0 - 9	97	0	0 - 7
Neuropsychiatric/Sensory Disease	23	4	0 - 86	21	0	0 - 87
Urologic Disease	17	0	1 - 28	22	9	0 - 97

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	90
Occupancy Rate (%):	56
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	130
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	0
Registered Nurses:	65
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WHITE CO MEMORIAL HOSP

1101 OCONNOR BLVD
MONTICELLO, IN 47960

Medicare Hospital Provider Number: 150036

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	461	15	10 - 17	481	15	10 - 17
Cancer	5	80	8 - 75	3	67	8 - 89
Cerebrovascular Accidents	28	50	14 - 50	20	40	13 - 55
Gastrointestinal Catastrophes	0	-	-	1	0	0 - 98
Infectious Disease	5	0	8 - 65	4	25	5 - 80
Metabolic/Electrolyte Disorders	7	14	4 - 64	8	38	8 - 70
Pulmonary Disease	47	21	12 - 38	51	16	15 - 38
Renal Failure	5	40	14 - 88	2	50	7 - 96
Severe Acute Heart Disease	23	39	24 - 63	20	55	22 - 64
Severe Chronic Heart Disease	41	24	12 - 39	44	27	12 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	44	0	1 - 13	39	5	0 - 47
Gynecologic Disease	2	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	40	5	0 - 26	41	5	0 - 29
Musculoskeletal/Skin Conditions	35	6	0 - 52	38	8	0 - 82
Neuropsychiatric/Sensory Disease	6	0	0 -100	13	8	0 - 95
Urologic Disease	26	0	0 - 96	25	0	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	59
Occupancy Rate (%):	37
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WHITE COUNTY MEMORIAL HOSPITAL
1101 O'Connor Boulevard, Monticello, Indiana 47960 (219) 583-7111

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

White County Memorial Hospital provides a full service oncology program under the direction of a board certified oncologist. The program includes diagnosis and treatment of cancers throughout the course of the disease process. Further, many small rural hospitals do not offer such a program and patients with suspicious malignancies must be transferred elsewhere for diagnosis and treatment.

The nature of the program is such that patients undergo treatment and receive appropriate care locally. Therefore it is expected and probable that the actual mortality rate would exceed the range for predicted mortality.

Overall the Hospital's actual mortality rates fall well within the predicted mortality rates as published by HCFA. Indeed, HCFA data themselves are not measures of hospital performance. Under no circumstances should they be used as the basis for judging the quality of care provided by different hospitals or programs.

Sincerely,

Ed Pfeiffer
Administrator

EP/bk
cc: Susan Mrzlack, Board Chairman
Frederic Henney, MD, Chief of Staff
Monica Ransom, RN, Director of Nursing
Lee Bennett, Director of Fiscal Services

WHITLEY COUNTY MEMORIAL HOSPITAL

353 N OAK ST
COLUMBIA CITY, IN 46725

Medicare Hospital Provider Number: 150101

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	653	12	9 - 15	633	13	9 - 16
Cancer	13	69	27 - 75	11	82	23 - 70
Cerebrovascular Accidents	23	26	13 - 49	25	24	16 - 50
Gastrointestinal Catastrophes	6	0	12 - 63	6	0	7 - 59
Infectious Disease	3	33	3 - 86	6	17	7 - 70
Metabolic/Electrolyte Disorders	10	20	3 - 60	6	0	4 - 59
Pulmonary Disease	57	21	15 - 38	57	18	13 - 36
Renal Failure	7	57	13 - 82	5	60	11 - 86
Severe Acute Heart Disease	28	43	22 - 58	30	33	21 - 55
Severe Chronic Heart Disease	42	24	11 - 38	44	23	12 - 38
Severe Trauma	1	100	1 - 97	0	-	-
Gastrointestinal Disease	64	2	1 - 12	64	3	1 - 14
Gynecologic Disease	9	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	76	5	0 - 18	57	7	1 - 22
Musculoskeletal/Skin Conditions	60	2	0 - 17	54	6	0 - 33
Neuropsychiatric/Sensory Disease	19	5	0 -100	9	22	0 -100
Urologic Disease	29	0	0 - 27	26	0	0 - 40

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	80
Occupancy Rate (%):	49
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	20
Percent of Physicians Who Are Board Certified Specialists:	30
Interns and Residents:	0
Registered Nurses:	54
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WILLIAM N WISHARD MEMORIAL HOSPITAL

1001 WEST 10TH STREET
INDIANAPOLIS, IN 46202

Medicare Hospital Provider Number: 150024

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,613	13	9 - 13	1,574	11	9 - 13
Cancer	47	47	26 - 57	46	39	25 - 56
Cerebrovascular Accidents	75	35	15 - 38	57	26	15 - 40
Gastrointestinal Catastrophes	23	48	12 - 55	20	35	12 - 56
Infectious Disease	13	54	12 - 64	12	17	10 - 57
Metabolic/Electrolyte Disorders	41	29	13 - 46	34	12	9 - 38
Pulmonary Disease	96	24	16 - 36	109	24	13 - 33
Renal Failure	8	88	11 - 72	4	50	7 - 86
Severe Acute Heart Disease	44	36	19 - 49	49	41	25 - 54
Severe Chronic Heart Disease	86	22	15 - 34	86	13	13 - 29
Severe Trauma	3	0	1 - 83	2	50	0 - 96
Gastrointestinal Disease	78	5	0 - 23	53	4	1 - 19
Gynecologic Disease	12	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	115	3	1 - 11	124	5	1 - 12
Musculoskeletal/Skin Conditions	148	4	0 - 12	128	2	0 - 10
Neuropsychiatric/Sensory Disease	132	3	0 - 11	132	1	0 - 8
Urologic Disease	56	4	0 - 26	62	3	0 - 32

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	415
Occupancy Rate (%):	69
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	398
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	0
Registered Nurses:	468
Licensed Practical Nurses:	98

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

October 21, 1988

William L. Roper, M.D.
Administrator
Department of Health & Human Services
Washington, DC 20201

Dear Dr. Roper:

The Wishard Hospital staff is appreciative of the opportunity provided by HCFA to review and comment on Medicare mortality data for 1987 and compare it to 1986 data. The data provided was researched and discussed jointly by a select group from the nursing, medical and administrative staff. Although our mortality rate of 13%, as assessed by HCFA, was within the acceptable range of 7 to 13 percent, there are comments and observations we feel obligated to make.

The areas and items of concern are:

1. As stated last year, Wishard is an urban, public, teaching hospital with a significant number of black patients. The staff believes that this fact has impact on how our data should be interpreted, since there is verifiable clinical data that supports a difference in disease processes along racial lines.

2. Wishard provides services to a disproportionate share of the economically disadvantaged residents in the area. Once again, there is evidence that suggests diet, environment, and available support systems can influence clinical outcomes.

3. Many elderly patients that we serve have significant co-morbid disease processes that exacerbate the patient's clinical prognosis. The above two items of race and socioeconomic status have a significant influence on co-morbid circumstances. It should be noted that 63% of the deaths targeted by HCFA were patients with more than two significant co-morbid conditions.

WISHARD
MEMORIAL
HOSPITAL

INDIANA UNIVERSITY
MEDICAL CENTER
1001 West 10th Street
Indianapolis, Indiana 46202
317/639-6671

"Division of Hospitals . . .
The Health and Hospital
Corporation of Marion County."

4. The possible interpretation of the aggressive admission, discharge and treatment of the elderly, multiple diseased patient may be problematic. Because of the routine, long-term involvement with admitted patients through the hospital clinics, the medical staff is well versed in the illnesses and prognosis of most patients. Therefore, when a disease or combination of diseases project a terminal outcome, and the patient's condition is appropriate for discharge, attempts are made to place the patient in a nursing home or to return them home with support of family and/or a visiting nurse.

5. Last year 50 of the 168 deaths from 1986, targeted by HCFA, occurred outside the hospital. For 1987 53 deaths were verified out of 211 as having occurred outside the hospital. These cases were identified from actual record review of 203 cases.

6. Of the 53 patients who died after discharge, 29 were identified as terminal at discharge, while 38 patients had documented clinical evidence of three or more co-morbid conditions.

I hope the items and concerns raised herein are constructive, and help to refine the HCFA data base.

Sincerely,

William T. Paynter, M.D.
Hospital Director

WTP/bb

WINONA MEMORIAL HOSPITAL

3232 NORTH MERIDIAN STREET
INDIANAPOLIS, IN 46208

Medicare Hospital Provider Number: 150014

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,761	14	10 - 15	1,970	13	10 - 14
Cancer	59	53	31 - 60	58	34	28 - 56
Cerebrovascular Accidents	62	26	15 - 38	69	17	16 - 36
Gastrointestinal Catastrophes	18	33	14 - 59	12	42	13 - 66
Infectious Disease	35	26	24 - 56	43	42	22 - 55
Metabolic/Electrolyte Disorders	57	23	13 - 41	39	23	11 - 43
Pulmonary Disease	104	19	15 - 34	114	24	15 - 34
Renal Failure	19	58	17 - 71	13	38	13 - 73
Severe Acute Heart Disease	57	54	28 - 55	68	40	30 - 54
Severe Chronic Heart Disease	78	26	13 - 34	101	27	13 - 32
Severe Trauma	0	-	-	3	33	2 - 87
Gastrointestinal Disease	137	4	1 - 10	144	7	1 - 13
Gynecologic Disease	9	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	184	3	1 - 8	207	2	1 - 6
Musculoskeletal/Skin Conditions	126	3	0 - 11	142	3	0 - 10
Neuropsychiatric/Sensory Disease	94	2	0 - 13	87	3	0 - 17
Urologic Disease	70	1	0 - 22	85	2	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	265
Occupancy Rate (%):	59
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	280
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	0
Registered Nurses:	170
Licensed Practical Nurses:	44

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WIRTH OSTEOPATHIC HOSPITAL

HIGHWAY 64-WEST
OAKLAND CITY, IN 47660

Medicare Hospital Provider Number: 150123

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	176	10	8 - 17	151	17	9 - 22
Cancer	1	100	2 - 97	1	100	3 - 99
Cerebrovascular Accidents	1	0	0 -100	4	50	5 - 82
Gastrointestinal Catastrophes	1	100	2 - 97	0	-	-
Infectious Disease	9	11	9 - 58	6	33	15 - 81
Metabolic/Electrolyte Disorders	5	0	3 - 65	11	0	3 - 42
Pulmonary Disease	22	14	11 - 43	23	17	12 - 45
Renal Failure	5	40	10 - 84	1	100	2 - 98
Severe Acute Heart Disease	0	-	-	3	33	3 - 86
Severe Chronic Heart Disease	13	46	5 - 58	12	25	7 - 57
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	8	0	0 -100	18	6	0 - 79
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	14	0	0 - 98	9	0	0 - 99
Musculoskeletal/Skin Conditions	19	0	0 - 32	14	21	0 - 92
Neuropsychiatric/Sensory Disease	3	0	0 -100	5	0	0 -100
Urologic Disease	17	12	0 - 60	11	27	0 - 75

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	34
Occupancy Rate (%):	29
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	17
Percent of Physicians Who Are Board Certified Specialists:	18
Interns and Residents:	0
Registered Nurses:	10
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WITHAM MEMORIAL HOSPITAL

1124 NORTH LEBANON STREET
LEBANON, IN 46052

Medicare Hospital Provider Number: 150104

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	581	14	11 - 17	652	12	11 - 17
Cancer	8	38	17 - 77	10	40	18 - 74
Cerebrovascular Accidents	30	30	12 - 45	28	25	14 - 47
Gastrointestinal Catastrophes	2	0	3 - 88	4	75	11 - 85
Infectious Disease	13	31	10 - 60	18	50	22 - 68
Metabolic/Electrolyte Disorders	14	21	9 - 55	20	15	5 - 44
Pulmonary Disease	57	30	17 - 42	57	25	15 - 40
Renal Failure	2	50	4 - 93	4	75	13 - 90
Severe Acute Heart Disease	28	36	24 - 60	25	40	24 - 62
Severe Chronic Heart Disease	43	26	12 - 39	37	22	17 - 44
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	39	3	0 - 23	58	5	0 - 21
Gynecologic Disease	3	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	59	0	1 - 9	80	1	2 - 9
Musculoskeletal/Skin Conditions	33	0	0 - 24	37	3	0 - 24
Neuropsychiatric/Sensory Disease	16	6	0 - 95	12	0	1 - 38
Urologic Disease	25	8	0 - 64	19	0	1 - 29

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	60
Occupancy Rate (%):	48
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	55
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	45
Licensed Practical Nurses:	9

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WOODLAWN HOSPITAL

1400 EAST 9TH ST
ROCHESTER, IN 46975

Medicare Hospital Provider Number: 150111

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	503	16	10 - 17	465	14	9 - 17
Cancer	8	63	14 - 74	7	43	18 - 81
Cerebrovascular Accidents	20	35	10 - 52	16	31	11 - 55
Gastrointestinal Catastrophes	6	33	6 - 74	2	100	9 - 93
Infectious Disease	7	57	11 - 75	7	29	14 - 76
Metabolic/Electrolyte Disorders	15	13	6 - 48	12	25	2 - 59
Pulmonary Disease	45	29	13 - 42	39	21	11 - 39
Renal Failure	1	0	2 - 98	1	100	3 - 99
Severe Acute Heart Disease	30	30	24 - 57	18	56	21 - 65
Severe Chronic Heart Disease	42	31	11 - 40	42	26	12 - 40
Severe Trauma	1	0	0 - 99	1	100	0 - 99
Gastrointestinal Disease	48	0	1 - 11	53	2	0 - 16
Gynecologic Disease	3	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	66	6	1 - 18	62	3	0 - 16
Musculoskeletal/Skin Conditions	31	10	0 - 43	15	0	0 - 97
Neuropsychiatric/Sensory Disease	11	9	0 -100	9	11	0 -100
Urologic Disease	10	0	0 - 77	25	0	0 - 58

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	49
Occupancy Rate (%):	69
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	20
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	34
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ADDISON COMMUNITY HOSPITAL

421 N STEER
ADDISON, MI 49220

Medicare Hospital Provider Number: 230175

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	120	7	6 - 16	124	6	6 - 16
Cancer	2	0	5 - 89	0	-	-
Cerebrovascular Accidents	1	0	0 - 99	0	-	-
Gastrointestinal Catastrophes	1	0	0 - 97	1	0	0 -100
Infectious Disease	1	0	1 - 97	0	-	-
Metabolic/Electrolyte Disorders	1	0	0 -100	0	-	-
Pulmonary Disease	12	17	8 - 54	16	13	9 - 46
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	2	100	4 - 89	8	38	13 - 72
Severe Chronic Heart Disease	4	50	1 - 85	0	-	-
Severe Trauma	1	0	1 - 97	0	-	-
Gastrointestinal Disease	12	0	0 - 98	10	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	22	0	0 - 31	31	0	0 - 19
Musculoskeletal/Skin Conditions	17	0	0 - 48	5	0	0 -100
Neuropsychiatric/Sensory Disease	3	0	0 -100	0	-	-
Urologic Disease	1	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	24
Occupancy Rate (%):	29
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	21
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	0
Registered Nurses:	8
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ALBION COM HOSP

809 W ERIE STREET
ALBION, MI 49224

Medicare Hospital Provider Number: 230087

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	405	12	8 - 16	452	10	9 - 15
Cancer	6	50	8 - 76	12	50	13 - 66
Cerebrovascular Accidents	11	18	9 - 57	11	73	7 - 59
Gastrointestinal Catastrophes	3	33	6 - 88	2	50	0 - 95
Infectious Disease	4	25	6 - 80	2	0	2 - 88
Metabolic/Electrolyte Disorders	8	13	4 - 61	15	20	5 - 51
Pulmonary Disease	34	21	11 - 41	40	15	11 - 36
Renal Failure	3	33	8 - 91	1	0	1 - 97
Severe Acute Heart Disease	17	47	21 - 66	32	28	23 - 55
Severe Chronic Heart Disease	26	31	11 - 46	26	12	9 - 37
Severe Trauma	1	0	3 - 99	0	-	-
Gastrointestinal Disease	40	5	0 - 29	26	0	0 - 31
Gynecologic Disease	5	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	69	1	1 - 11	79	1	1 - 10
Musculoskeletal/Skin Conditions	25	8	0 - 59	17	0	0 - 77
Neuropsychiatric/Sensory Disease	11	0	0 -100	14	0	0 - 94
Urologic Disease	13	0	0 -100	16	0	0 - 96

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	55
Occupancy Rate (%):	49
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	20
Percent of Physicians Who Are Board Certified Specialists:	60
Interns and Residents:	0
Registered Nurses:	49
Licensed Practical Nurses:	22

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ALBION COMMUNITY HOSPITAL
Personal Family Health Care
809 WEST ERIE ST. · ALBION, MI 49224 · 517/629-2191

October 10, 1988

William M. Roper, M.D.
Administrator
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

The Quality Assurance Committee has examined our hospital's mortality data, which will be released to the public in December 1988. The mortality statistics reflect the number of Medicare patients whose last discharge in 1987 was from our hospital, the actual percent of those patients who died within 30 days of the admission which resulted in their last 1987 discharge, the predicted range of the percent of patients who would have been expected to die, given the adjustments for patient mix. From this statistical information, it is our conclusion that Albion Community Hospital's actual mortality rate fell within or below the range for predicted mortality in each of the 16 diagnostic categories.

Our review of this information revealed that only two (2) diagnostic categories; Chronic Heart Disease and Severe Acute Heart Disease affected the calculation of our Inpatient Mortality statistics.

A total of three (3) charts were listed as 1987 Medicare inpatient deaths. All three (3) cases and two (2) categories specified fell within or below the Michigan Quartile Ranking.

In summary, it is our conclusion that our Mortality statistical ranges were medically justified. In the aggregates, our hospital has not been ranked due to an insufficient number of deaths in our hospital (< 10), for the year 1987.

Sincerely yours;

Moses Muzquiz, M.D. F.A. C.A.
Chairman, Quality Assurance Committee

Richard C. Hoeth,
President

ALEXANDER BLAIN MEMORIAL HOSPITAL

2201 E JEFFERSON
DETROIT, MI 48207

Medicare Hospital Provider Number: 230231

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	55	5	7 - 21	149	5	6 - 14
Cancer	0	-	-	1	100	3 - 99
Cerebrovascular Accidents	5	0	6 - 63	2	50	2 - 92
Gastrointestinal Catastrophes	0	-	-	1	0	0 - 99
Infectious Disease	0	-	-	3	33	7 - 88
Metabolic/Electrolyte Disorders	5	0	1 - 71	5	0	4 - 64
Pulmonary Disease	9	11	5 - 55	6	0	4 - 58
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	3	0	4 - 79	2	0	7 - 91
Severe Chronic Heart Disease	3	0	3 - 79	11	9	5 - 49
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	3	0	0 -100	7	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	8	0	0 - 92	37	0	0 - 19
Musculoskeletal/Skin Conditions	2	0	0 -100	10	0	0 - 99
Neuropsychiatric/Sensory Disease	0	-	-	3	0	0 -100
Urologic Disease	3	0	0 -100	5	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	117
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	20
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ALLEGAN GENERAL HOSPITAL

555 LINN ST
ALLEGAN, MI 49010

Medicare Hospital Provider Number: 230042

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	567	14	10 - 16	549	13	10 - 17
Cancer	17	59	19 - 65	9	44	14 - 72
Cerebrovascular Accidents	33	27	14 - 45	28	39	17 - 53
Gastrointestinal Catastrophes	5	60	9 - 80	5	40	11 - 82
Infectious Disease	12	25	8 - 58	11	36	13 - 67
Metabolic/Electrolyte Disorders	10	10	6 - 54	11	0	6 - 42
Pulmonary Disease	26	8	19 - 44	37	19	18 - 45
Renal Failure	0	-	-	2	100	9 - 94
Severe Acute Heart Disease	21	48	24 - 65	18	50	23 - 67
Severe Chronic Heart Disease	45	27	14 - 41	41	15	14 - 37
Severe Trauma	0	-	-	1	0	1 - 97
Gastrointestinal Disease	31	0	0 - 28	38	5	0 - 30
Gynecologic Disease	5	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	61	3	1 - 16	47	2	1 - 17
Musculoskeletal/Skin Conditions	44	5	0 - 26	41	2	0 - 40
Neuropsychiatric/Sensory Disease	25	0	0 - 78	22	9	0 - 96
Urologic Disease	40	0	0 - 31	31	3	0 - 52

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	75
Occupancy Rate (%):	51
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	21
Percent of Physicians Who Are Board Certified Specialists:	90
Interns and Residents:	0
Registered Nurses:	66
Licensed Practical Nurses:	21

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ALPENA GENERAL HOSPITAL

1501-1511 W CHISHOLM ST
ALPENA, MI 49707

Medicare Hospital Provider Number: 230036

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,374	12	10 - 15	1,298	12	10 - 15
Cancer	29	34	27 - 62	28	54	24 - 62
Cerebrovascular Accidents	45	22	16 - 41	38	32	17 - 47
Gastrointestinal Catastrophes	19	42	18 - 63	13	46	15 - 67
Infectious Disease	19	32	17 - 59	9	33	12 - 70
Metabolic/Electrolyte Disorders	18	22	10 - 52	18	22	10 - 52
Pulmonary Disease	74	20	18 - 39	88	17	17 - 36
Renal Failure	7	29	17 - 84	4	25	9 - 85
Severe Acute Heart Disease	84	36	28 - 51	79	37	27 - 50
Severe Chronic Heart Disease	86	24	13 - 33	65	17	15 - 35
Severe Trauma	4	75	6 - 81	2	0	2 - 89
Gastrointestinal Disease	105	1	1 - 8	93	4	1 - 13
Gynecologic Disease	10	10	0 -100	9	0	0 -100
Low-Risk Heart Disease	198	3	1 - 7	192	2	2 - 7
Musculoskeletal/Skin Conditions	123	1	1 - 7	133	4	1 - 10
Neuropsychiatric/Sensory Disease	40	2	0 - 27	17	18	0 - 80
Urologic Disease	63	3	0 - 18	56	2	0 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	176
Occupancy Rate (%):	52
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	44
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	85
Licensed Practical Nurses:	60

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ANDERSON MEM HOSP

400 MAIN ST
NORWAY, MI 49870

Medicare Hospital Provider Number: 230138

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	168	9	9 - 18	160	17	11 - 24
Cancer	5	80	16 - 82	12	92	39 - 79
Cerebrovascular Accidents	10	10	12 - 57	12	25	12 - 60
Gastrointestinal Catastrophes	1	100	3 - 98	3	0	6 - 80
Infectious Disease	1	0	0 - 99	1	100	3 - 98
Metabolic/Electrolyte Disorders	2	0	0 - 96	1	0	0 - 98
Pulmonary Disease	5	40	4 - 77	14	14	8 - 49
Renal Failure	2	100	4 - 89	1	100	3 - 98
Severe Acute Heart Disease	5	0	13 - 68	5	80	15 - 81
Severe Chronic Heart Disease	16	13	9 - 46	15	13	8 - 47
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	12	0	2 - 36	9	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	26	8	0 - 40	21	5	0 - 57
Musculoskeletal/Skin Conditions	15	0	0 - 69	8	0	0 -100
Neuropsychiatric/Sensory Disease	16	0	0 - 37	11	0	0 - 99
Urologic Disease	4	0	0 -100	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	19
Ownership/Control:	Local Government

STAFFING

Interns and Residents:	0
Registered Nurses:	2
Licensed Practical Nurses:	1

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

"Where Professionalism Meets Personal Care"

DCH

DICKINSON COUNTY HOSPITALS

400 WOODWARD AVENUE • IRON MOUNTAIN, MI 49801 • TELEPHONE (906) 774-1313

October 19, 1988

Provider # 230138

The mortality data provided by HCFA, while useful for hospitals and other agencies, can often be misleading to the general public. Statistical data produces black and white information that does not allow for entry of variables. Hospitals are required to comply with many standards developed and enforced by other accrediting agencies which compounds an already labor-intensive field.

The mortality data regarding Anderson Memorial Hospital requires a brief response. Anderson Memorial is a small, rural, 19--bed hospital functionally serving as a provider of quality healthcare for a population base consisting mostly of medicare-age people. While Anderson's data falls mainly within a normal range, there are three areas that vary from the estimated range that may be misconstrued. It is important to note here that fewer numbers of cases admitted in a specific category may reflect a greater uncertainty in the expected mortality range. Hence, when only two people are admitted in a specific category and they both die, there would be a 100% mortality rate.

In review of the information provided by the data, it is important to note that all three categories: Renal failure; G.I. catastrophies and Cancer shared common information not reflected in the publicized data. Each individual case admitted had other predisposing health problems, while the data reflects only the admitting category. All of the cases were admitted in the later stages of the disease process when care could no longer be provided as it had. In all of the cases, there was a predictable expected outcome.

It is the goal of Anderson Memorial Hospital to provide quality healthcare for our community and continually strive to meet the changing needs of those we serve.

ANNAPOLIS HOSPITAL

33155 ANNAPOLIS AVE
WAYNE, MI 48184

Medicare Hospital Provider Number: 230142

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,748	13	10 - 15	1,874	13	11 - 15
Cancer	39	41	27 - 60	50	38	30 - 60
Cerebrovascular Accidents	68	21	18 - 39	66	29	18 - 41
Gastrointestinal Catastrophes	10	20	14 - 65	10	30	13 - 68
Infectious Disease	16	25	18 - 61	20	40	20 - 63
Metabolic/Electrolyte Disorders	23	39	14 - 56	42	38	14 - 48
Pulmonary Disease	93	30	16 - 37	102	27	19 - 39
Renal Failure	11	36	18 - 79	10	50	20 - 84
Severe Acute Heart Disease	77	39	27 - 51	75	56	29 - 53
Severe Chronic Heart Disease	134	37	17 - 35	161	24	16 - 31
Severe Trauma	3	33	3 - 86	0	-	-
Gastrointestinal Disease	113	2	1 - 9	125	2	1 - 9
Gynecologic Disease	27	0	0 -100	25	0	0 -100
Low-Risk Heart Disease	360	3	2 - 6	387	2	2 - 5
Musculoskeletal/Skin Conditions	84	7	0 - 19	99	1	2 - 8
Neuropsychiatric/Sensory Disease	38	0	0 - 26	33	6	0 - 45
Urologic Disease	127	2	0 - 10	99	0	1 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	276
Occupancy Rate (%):	68
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	121
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	151
Licensed Practical Nurses:	58

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

PCHA ANNAPOLIS HOSPITAL UNIT OF PEOPLES COMMUNITY HOSPITAL AUTHORITY

WADE C. ADAMS, *ADMINISTRATOR* · 33155 ANNAPOLIS, P. O. BOX 806, WAYNE, MI 48184 · [illegible]

MEMBER COMMUNITIES

CITIES OF

ALLEN PARK

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FLAT ROCK

GARDEN CITY

INKSTER

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MELVINDALE

RIVER ROUGE

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WAYNE

WESTLAND

WOODHAVEN

YPSILANTI

TOWNSHIPS OF

HURON

SUMPTER

SUPERIOR

VAN BUREN

YPSILANTI

October 21, 1988 Medicare Provider #23-0142

Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

On behalf of Annapolis Hospital, I would like to make the following comments regarding the 1987 HCFA Mortality information:

- According to HCFA's calculations, Annapolis Hospital had a 13% actual mortality rate for all causes in the diagnostic categories studied. However, the Hospital's Professional Activity Study report for the same period reflects a more accurate mortality rate of 7%.

  The discrepancy is due to method HCFA used to calculate the total number of Medicare patients treated at a hospital for the study period. HCFA assigned each patient to the hospital where their last admission occurred. If a patient was treated in a hospital and subsequently treated again, by that facility or another, the previous admissions were not taken into account.

  Therefore, the number of Medicare patients actually treated within a hospital during the study period are greater than the number assigned by HCFA.

- Generally, it is expected that older patients will have a higher probability of death. For the 228 deaths in the Annapolis Hospital mortality data, 44.3% of the patients were 80 years or older, 81.6% were 70 years or older and in 93.9% of the cases, the patients were 65 year or older.

- All actual mortality rates for the diagnostic categories studied were well within the ranges for

predicted mortality. The one exception was the severe chronic heart disease category which was 2% outside of the predicted mortality range. Of the 134 patient studied with severe chronic heart disease, there were 49 deaths.

At least 73.5% of these patients had at least one comorbidity, an additional medical condition of the patient's illness. The most common comorbid conditions of patients within the diagnostic categories were as follows: pneumonia, cardiorespiratory arrest, renal failure, diabetes mellitus, chronic obstructive pulmonary disease, gatrointestinal bleeding, myocardial infarction, cancer and respiratory failure.

I hope this information is helpful to you in presenting your data to the public. If you have questions about the data contained within this letter, please feel free to contact me.

Very truly yours,

Wade C. Adams

Wade C. Adams
Administrator

WCA/dd

cc: F. E. Blair
M. Camps
B. Heenan
V. Goburdhun, M.D.

BARAGA COUNTY MEMORIAL HOSPITAL

770 NORTH MAIN STREET
L ANSE, MI 49946

Medicare Hospital Provider Number: 230056

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	366	9	9 - 15	358	10	9 - 16
Cancer	5	60	23 - 95	8	75	20 - 77
Cerebrovascular Accidents	12	8	9 - 48	22	9	13 - 42
Gastrointestinal Catastrophes	3	0	12 - 84	3	0	12 - 84
Infectious Disease	8	38	13 - 73	2	0	1 - 90
Metabolic/Electrolyte Disorders	10	20	7 - 60	11	9	5 - 51
Pulmonary Disease	12	8	8 - 48	16	19	6 - 48
Renal Failure	1	100	1 - 97	1	100	3 - 98
Severe Acute Heart Disease	12	25	18 - 66	19	47	20 - 63
Severe Chronic Heart Disease	27	22	11 - 43	26	15	11 - 41
Severe Trauma	0	-	-	2	0	2 - 88
Gastrointestinal Disease	30	3	0 - 30	29	3	0 - 41
Gynecologic Disease	3	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	50	4	1 - 17	54	0	1 - 10
Musculoskeletal/Skin Conditions	43	2	0 - 25	34	3	0 - 45
Neuropsychiatric/Sensory Disease	25	4	0 - 62	19	0	0 - 96
Urologic Disease	12	0	0 - 98	20	0	0 - 78

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	67
Occupancy Rate (%):	73
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	8
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	14
Licensed Practical Nurses:	18

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BATTLE CREEK ADVENTIST HOSP

165 NORTH WASHINGTON AVE
BATTLE CREEK, MI 49016

Medicare Hospital Provider Number: 230043

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	16	0	0 -100	18	0	0 -100
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	0	-	-
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	0	-	-
Musculoskeletal/Skin Conditions	0	-	-	0	-	-
Neuropsychiatric/Sensory Disease	15	0	0 -100	18	0	0 -100
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	136
Occupancy Rate (%):	70
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	11
Percent of Physicians Who Are Board Certified Specialists:	27
Interns and Residents:	0
Registered Nurses:	52
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BATTLE CREEK HEALTH SYSTEM

300 NORTH AVENUE
BATTLE CREEK, MI 49016

Medicare Hospital Provider Number: 230075

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,859	14	11 - 16	1,892	13	10 - 15
Cancer	79	52	32 - 57	84	55	31 - 56
Cerebrovascular Accidents	69	20	19 - 40	79	27	18 - 39
Gastrointestinal Catastrophes	24	29	16 - 55	18	39	13 - 59
Infectious Disease	31	42	17 - 53	20	40	17 - 61
Metabolic/Electrolyte Disorders	38	18	14 - 45	47	15	11 - 38
Pulmonary Disease	130	32	19 - 38	125	15	14 - 31
Renal Failure	6	67	13 - 83	6	67	9 - 80
Severe Acute Heart Disease	72	39	27 - 52	34	41	25 - 58
Severe Chronic Heart Disease	88	32	14 - 35	97	32	17 - 37
Severe Trauma	1	100	0 - 99	1	0	0 -100
Gastrointestinal Disease	108	2	1 - 9	142	3	1 - 9
Gynecologic Disease	16	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	203	3	2 - 7	189	5	1 - 9
Musculoskeletal/Skin Conditions	170	2	1 - 8	189	3	1 - 8
Neuropsychiatric/Sensory Disease	20	0	0 - 44	33	6	0 - 70
Urologic Disease	81	0	0 - 9	86	1	1 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	211
Occupancy Rate (%):	91
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	122
Percent of Physicians Who Are Board Certified Specialists:	61
Interns and Residents:	0
Registered Nurses:	165
Licensed Practical Nurses:	91

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BAY AREA MEDICAL CENTER MENOMNEE

1110 10TH AVE
MENOMINEE, MI 49858

Medicare Hospital Provider Number: 230265

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	529	18	13 - 20	617	12	8 - 14
Cancer	35	69	33 - 65	22	27	21 - 59
Cerebrovascular Accidents	32	34	16 - 49	24	38	9 - 48
Gastrointestinal Catastrophes	3	33	14 - 96	1	100	0 - 97
Infectious Disease	14	50	16 - 66	10	40	12 - 69
Metabolic/Electrolyte Disorders	16	19	12 - 55	4	0	5 - 71
Pulmonary Disease	35	17	15 - 42	22	32	14 - 53
Renal Failure	3	33	6 - 88	2	50	1 - 93
Severe Acute Heart Disease	6	50	10 - 77	13	23	19 - 65
Severe Chronic Heart Disease	27	19	9 - 40	29	21	13 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	38	5	0 - 36	59	3	0 - 21
Gynecologic Disease	0	-	-	1	0	0 -100
Low-Risk Heart Disease	45	4	0 - 24	65	5	1 - 16
Musculoskeletal/Skin Conditions	45	2	0 - 35	78	0	0 - 8
Neuropsychiatric/Sensory Disease	16	0	0 - 83	14	14	0 -100
Urologic Disease	12	0	0 -100	41	2	0 - 73

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	40
Occupancy Rate (%):	50
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	38
Percent of Physicians Who Are Board Certified Specialists:	87
Interns and Residents:	0
Registered Nurses:	30
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BAY MEDICAL CENTER

1900 COLUMBUS AVE
BAY CITY, MI 48706

Medicare Hospital Provider Number: 230041

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,857	11	9 - 13	2,667	9	9 - 13
Cancer	81	51	30 - 56	79	42	32 - 58
Cerebrovascular Accidents	94	22	19 - 37	94	26	18 - 37
Gastrointestinal Catastrophes	14	43	11 - 62	21	19	14 - 52
Infectious Disease	15	40	18 - 66	16	19	22 - 64
Metabolic/Electrolyte Disorders	13	23	9 - 58	24	8	8 - 39
Pulmonary Disease	104	18	17 - 36	96	11	17 - 34
Renal Failure	7	86	25 - 88	12	42	15 - 76
Severe Acute Heart Disease	100	41	27 - 49	87	41	27 - 49
Severe Chronic Heart Disease	151	30	18 - 34	144	24	18 - 34
Severe Trauma	6	0	7 - 60	3	33	2 - 87
Gastrointestinal Disease	225	3	2 - 7	201	1	2 - 6
Gynecologic Disease	26	0	0 -100	24	0	0 -100
Low-Risk Heart Disease	555	3	2 - 5	503	2	2 - 5
Musculoskeletal/Skin Conditions	241	2	1 - 6	264	2	1 - 6
Neuropsychiatric/Sensory Disease	89	2	0 - 16	67	1	0 - 14
Urologic Disease	101	4	0 - 23	95	1	1 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	378
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	115
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	284
Licensed Practical Nurses:	87

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BAY MEDICAL CENTER
1900 Columbus Avenue
Bay City, Michigan
48708

October 19, 1988

William L. Roper, M.D.
Administrator
Department of Health & Human Services
Washington, D.C. 20201

RE: Medicare I.D. # 230041

Dear Dr. Roper:

Representatives of the hospital's Quality Assurance and Medical Staff have reviewed the mortality information from HCFA about Medicare patients discharged from Bay Medical Center (BMC) in 1987. The following comments are submitted for your consideration:

DATA VERIFICATION:

Our records indicate the number of Medicare discharges to be 15% higher in 1987 than the figures released by HCFA. Presumably, the discrepancy reflects multiple admissions of individual beneficiaries to BMC.

It is impossible to determine the cause of death in most of the patients dying after discharge from Bay Medical Center.

DATA INTERPRETATION:

Our actual mortality rate, as reported by HCFA, fell within or below the range of predicted mortality rate. We found a number of significant factors in the assessment: (1) over 80% of the patients who died were terminally ill and the family had requested "Do not resuscitate" orders during their admission; (2) the average age of the patient who died was 76.3 years; and (3) over 80% of the patients who died had multiple comorbid conditions especially in the severe chronic heart disease category (98%). BMC's cancer program is accredited by the American College of Surgeons. As such, we routinely receive referrals of more complicated patients, that HCFA's methodology would not account for; thereby also explaining our mortality rate (within the predicted range).

Other limitations of the data released by HCFA are both the relatively small number of patients in some categories; such as, renal failure, infectious disease and the potential misleading characteristics of the data (i.e., cases coded to heart disease as the reason for final admission and death, but not truly the patient's underlying cause of illness such as carcinoma or chronic lung disease).

This years HCFA "model" still does not include measures of severity, whether the patient was transferred to the hospital from a nursing home, was receiving treatment at home prior to admission, had a terminal illness, or the psychological state or general health status of the patient.

The specific information released by HCFA is of limited value to BMC in identifying areas for review, and although it may be interesting

to the general public, it should not be considered a quality indicator for the following reasons:

1. There is no comparison between Medicare and non-Medicare patients.
2. There is no indication of the process of care.
3. There is no direct correlation between quality of care and mortality.
4. There is no identification of underlying cause of illness.
5. There is no measure of severity of illness.

SUMMARY:

Bay Medical Center has a long standing commitment to ensuring the highest quality of care for our patients. We have voluntarily maintained accreditation through the Joint Commission on Accreditation of Healthcare Organizations. This commitment is carried out through the operation of a comprehensive Quality Assurance Program. This program is under the overall direction of the Board of Directors and is implemented and carried out by its Medical and Dental Staff and Administration. It is designed to objectively and systematically monitor and evaluate the quality and appropriateness of care, pursue opportunities to improve care, and to resolve identified problems. This program incorporates not only mortality review but a vast array of other peer review activities undertaken by both the Medical and Professional staffs of the hospital. Mortality review is only one element of a comprehensive occurrence screening program conducted at BMC which monitors adverse patient events that are not a natural consequence of the patient's disease, condition, or procedure. Such events are reviewed to identify trends, opportunities to correct problems and to encourage and focus productive communication among the professional and medical staff. It is decentralized to all levels of the organization with the principal responsibility being that of the respective hospital and Medical Staff departments.

BMC continues to support the efforts of the American Hospital Association, Joint Commission on Accreditation of Healthcare Organizations, and other organizations that are investigating objective methods of evaluating hospital quality that rely on measures other than mortality rates. We have been and shall continue to be committed to any activities that can assure our public of the highest quality of care and will insist upon their development.

Yours very truly,

ANTHONY W. ARMSTRONG
President/Chief Operating Officer

BAY OSTEOPATHIC HOSPITAL

3250 E MIDLAND ROAD
BAY CITY, MI 48706

Medicare Hospital Provider Number: 230256

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	501	15	8 - 15	532	15	8 - 15
Cancer	11	64	17 - 70	11	27	11 - 63
Cerebrovascular Accidents	10	30	8 - 62	16	50	10 - 57
Gastrointestinal Catastrophes	3	33	4 - 86	3	67	2 - 87
Infectious Disease	6	17	10 - 72	3	33	5 - 87
Metabolic/Electrolyte Disorders	3	0	1 - 82	6	33	7 - 74
Pulmonary Disease	29	17	14 - 44	50	16	12 - 36
Renal Failure	6	67	9 - 80	1	0	2 - 97
Severe Acute Heart Disease	9	56	13 - 71	14	50	15 - 64
Severe Chronic Heart Disease	48	54	14 - 42	38	45	12 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	31	0	0 - 25	35	6	0 - 36
Gynecologic Disease	8	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	68	6	0 - 22	79	1	1 - 9
Musculoskeletal/Skin Conditions	24	0	0 - 64	41	0	0 - 18
Neuropsychiatric/Sensory Disease	23	0	0 - 62	22	0	0 - 69
Urologic Disease	37	5	0 - 74	29	7	0 - 91

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	86
Occupancy Rate (%):	42
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	42
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	0
Registered Nurses:	55
Licensed Practical Nurses:	28

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BOH
Bay Osteopathic Hospital
3250 East Midland Road
Bay City, Michigan 48706
Phone (517) 686-2920

John J. Mills
PRESIDENT

October 18, 1988

William L. Roper, M.D.,Administrator
Health Care Finance Administration
Dept. of Health & Human Services
6325 Security Boulevard
Baltimore, MD 21207

Dear Dr. Roper:

We recently received the mortality information for Medicare patients whose last admission in 1987 was to Bay Osteopathic Hospital and who died within 30 days of admission. In reviewing the statistics we noted that of the 501 cases falling into the above category, 76 expired for an overall mortality rate of 15%. Of these 76 patients, we found that 53 died during hospitalization rather than 51 as reported. We also found errors regarding the Hospital Characteristics Survey of 1986. Contrary to your information we had six interns in 1986 for a ratio of 1 per 7 beds, and a six bed combined CCU/ICU. These are the only errors we can validate since we have no means to review the cases that expired elsewhere.

While conducting a case by case chart audit we identified the following information on the 76 patients admitted who died within 30 days of admission:

1. Fifty-four patients, representing 71%, were directly admitted from the Emergency Room

2. Fifty-three patients expired while hospitalized; twenty-three died elsewhere and of these, fifteen were discharged to nursing homes

3. Twenty-six patients, representing 34%, were admitted from nursing homes

4. Seventy-one patients, representing 93%, presented with multiple medical problems

5. The average age was 78.2 years

6. Forty-three patients, representing 57%, had "Do Not Resuscitate" orders requested by the family

With regard to patients in the Severe Chronic Heart Disease category where the actual mortality rate exceeded the predicted mortality rate, the average age was 79.2 years. There were a total of twenty-six deaths, accounting for 34% of all mortalities. Nineteen patients, representing 73% of the group, were admitted from the Emergency Room with "No Code" orders and twenty-two expired while hospitalized. This particular category of the 1986 mortality rate also placed us above the predicted range and we would again like to stress that Bay Osteopathic physicians are responsible for many of the nursing home patients in Bay County. These patients come to us via the Emergency Room with very complicated acute and chronic problems and with very guarded prognoses.

In conclusion, we respectfully wish to emphasize that the HCFA data in itself is not a measure of hospital performance last year. These factors reflect the significant number of our Medicare patients who are among the frail elderly, are acutely ill, and in many cases, are near death when they are admitted to the hospital. Nevertheless, the mortality information is a valuable tool and will be fully utilized by our Quality Assurance Committee.

Sincerely,

John J. Mills

John J. Mills
President

JJM:bp

BERRIEN GENERAL HOSP

1250 DEANS HILL RD
BERRIEN CENTER, MI 49102

Medicare Hospital Provider Number: 230125

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	405	20	13 - 21	463	23	13 - 21
Cancer	6	50	15 - 82	12	67	19 - 70
Cerebrovascular Accidents	11	9	12 - 53	27	48	15 - 52
Gastrointestinal Catastrophes	9	44	14 - 73	5	0	6 - 65
Infectious Disease	24	42	17 - 58	20	35	15 - 58
Metabolic/Electrolyte Disorders	5	60	4 - 78	10	30	10 - 65
Pulmonary Disease	61	28	17 - 42	47	45	15 - 45
Renal Failure	13	62	11 - 71	9	44	15 - 80
Severe Acute Heart Disease	16	31	23 - 67	26	54	24 - 61
Severe Chronic Heart Disease	21	48	12 - 53	27	30	10 - 45
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	30	7	0 - 74	29	7	0 - 50
Gynecologic Disease	2	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	25	0	0 - 27	27	4	0 - 33
Musculoskeletal/Skin Conditions	25	8	0 - 81	34	6	0 - 56
Neuropsychiatric/Sensory Disease	7	0	0 -100	10	20	0 - 88
Urologic Disease	13	0	0 -100	22	5	0 - 91

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	248
Occupancy Rate (%):	87
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	59
Percent of Physicians Who Are Board Certified Specialists:	47
Interns and Residents:	0
Registered Nurses:	54
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Berrien General Hospital
6418 Deans Hill Road
Berrien Center, MI 49102
(616) 471-7761

Medicare Provider #

230125

Berrien General Hospital

Response/HCFA 1987 Mortality Data

With its 187-bed hospital-based skilled nursing unit, Berrien General Hospital serves a specialized Medicare population. This is a population for whom death is the medically expected outcome because of the patients' advanced state of disease at the time of admission. The 1987 HCFA Medicare Mortality Data continues to confirm this correlation.

The major factors contributing to Berrien General's Medicare mortality rate in both 1986 and 1987 were: the high percentage of Medicare patients admitted to the hospital from area nursing homes; the extremely high incidence of co-morbidity in the hospital's Medicare admissions; and the "do not resuscitate" status of the majority of the Medicare patients who died.

In 1987, 30% of the Medicare patients admitted to Berrien General's medical/surgical and intensive care units were admitted directly from area nursing homes. Berrien General

Hospital's medical staff continues to provide medical care to 40% of Berrien County's nursing home patients. Because of their severe underlying health problems, these chronically ill, seriously debilitated patients had a higher predicted mortality rate. In fact, of the 82 Medicare mortalities, 43 (52%) were of patients admitted from area nursing homes.

Applying HCFA defined co-morbidity criteria, the hospital determined that 84% of its Medicare patients who died in 1987 had signficant co-morbid conditions. That co-existing medical conditions are significant factors contributing to death is reflected by HCFA's consideration of co-morbidity elements in the development of the 1987 HCFA Medicare Mortality Data.

The third critical factor impacting Berrien General Hospital's Medicare mortality rate is the incidence of "do not resuscitate" orders. Of the hospital's 82 Medicare mortalities, 60 (73%) were of patients for whom the patients and families had requested that no extraordinary measures be taken to continue life.

The only hospital-based skilled nursing provider in our eight-county region, Berrien General Hospital meets the needs of a specialized Medicare population characterized by high incidence of severe underlying health problems. The hospital's 1987 Medicare mortality rates are fully consistent with those predicted for this type of patient population.

In review of the Mortality Report's catagories reflecting hospital characteristics, the organization wishes to note the serious omission of the very significant specialty service of "hospital-based skilled nursing unit".

BEYER MEM HOSP

135 S PROSPECT ST
YPSILANTI, MI 48197

Medicare Hospital Provider Number: 230144

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	740	18	11 - 17	768	18	11 - 17
Cancer	10	70	20 - 74	12	42	12 - 65
Cerebrovascular Accidents	27	37	14 - 50	25	40	13 - 51
Gastrointestinal Catastrophes	8	50	15 - 76	5	40	2 - 78
Infectious Disease	12	67	18 - 69	11	36	16 - 70
Metabolic/Electrolyte Disorders	25	32	12 - 52	35	37	7 - 44
Pulmonary Disease	67	45	19 - 45	56	36	16 - 43
Renal Failure	6	67	12 - 83	4	50	7 - 86
Severe Acute Heart Disease	39	51	22 - 54	50	60	28 - 56
Severe Chronic Heart Disease	35	29	11 - 42	39	23	13 - 40
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	34	3	0 - 33	50	4	0 - 31
Gynecologic Disease	3	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	151	3	2 - 8	110	4	1 - 10
Musculoskeletal/Skin Conditions	38	3	0 - 36	38	5	0 - 45
Neuropsychiatric/Sensory Disease	9	11	0 -100	15	0	0 - 99
Urologic Disease	41	7	0 - 54	28	4	0 - 67

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	148
Occupancy Rate (%):	37
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	74
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	0
Registered Nurses:	99
Licensed Practical Nurses:	30

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

BEYER MEMORIAL HOSPITAL
YPSILANTI, MICHIGAN

COMMENTS REGARDING THE HCFA
MORTALITY INFORMATION OF 1987

COMMENTS ON THE METHODOLOGY

Beyer Memorial Hospital is again registering our concerns with the limitations of the model used by HCFA. Dr. Roper, Administrator of HCFA, has himself stated "we cannot and do not recommend the use of the information by itself, to make judgements about the quality of care in an individual hospital or to make comparisons among hospitals." Mortality is not a good indicator of quality. The model used by HCFA has a number of flaws, most notable of which is the assumption that a hospital has average patients. This model ignores the severity of a patient's illness, the acuity of the patient's condition on admission, the presence of multiple comorbid conditions, the presence of no-code orders, which indicate that death is the expected outcome for the patient, the environment from which the patient comes to the hospital, and where the patient actually dies. Ignoring these significant characteristics does a disservice to the hospital.

The statistical significance of the HCFA model can be challenged, particularly as it relates to a smaller hospital. Because of the lower number of overall discharges, as few as four (4) occurrences less alters the results. Beyer Memorial Hospital falls within the expected range of mortality for each of the sixteen HCFA categories. Despite that, the overall mortality rate is just outside the expected range. The HCFA model includes deaths that occurred within thirty (30) days of the last admission of a Medicare beneficiary to a hospital during 1987. If all Medicare admissions during 1987 are included, our mortality rate for Medicare patients, who died in the hospital, is only nine percent (9%).

COMMENTS ON FINDINGS

Beyer Memorial Hospital has a rigorous quality assurance program in place. As part of this program, all deaths which occur in the hospital are reviewed by a panel of physicians from the appropriate specialty, to assure that patient care was of a high quality. We have completed an in-depth analysis of all deaths reported by HCFA

In our evaluation of each case, a four point scale measuring the acuity of the patient's condition at admission was applied as follows:

#1	Good	(patient does not appear unstable)
#2	Fair	(patient has some degree of system decompensation)
#3	Poor	(patient has multi-system decompensation)
#4	Grave	(patient is medically unstable and at risk for death)

The results of our analysis of the 1987 deaths identified by HCFA, are summarized as follows:

Admitting Acuity		Number of Patients	Percent	
#1	Good	0	0%	
#2	Fair	4	3%	
#3	Poor	37	28%	97%
#4	Grave	92	69%	

In ninety-seven percent (97%) of the deaths reported by HCFA, the patients had an admission acuity of poor or grave.

The deteriorated condition of these patients is further clarified when the presence of two or more comorbid conditions is considered. The HCFA model screens for only one comorbid condition. Our evaluation identified the presence of two or more comorbid conditions in virtually every case.

Additionally, seventy-two percent (72%) of these patients had no-code, or do not resuscitate, orders. It must be noted that a no-code order requires the endorsement of the patient and/or the patient's family, and therefore, indicates a clear awareness that the patient is near death.

The environment from which the patient came to the hospital is also ignored by HCFA. Fifty-six percent (56%) of the patients who subsequently died came to Beyer directly from area nursing homes. An additional thirty-five percent (35%) were admitted through the Emergency Department. Taken together this represents ninety-one percent (91%) of the patients.

The average age of the patients is 79 years, suggesting the patients were more elderly than average. Of the deaths in question, eighteen percent (18%) of the patients died outside the hospital.

It is obvious that Beyer Memorial Hospital served a number of elderly, frail patients, who were known to have terminal conditions when they were admitted to the hospital. Almost every patient was admitted in a poor or grave condition, and the majority of the patients had no-code orders. Virtually every patient in question had two or more comorbid conditions. The fact that the HCFA model does not take these significant factors into account, indicates that the model must be refined before any conclusions can be drawn from this data.

COMMENT ON THE DATA

The study lists Beyer as a 108 bed facility. Beyer Memorial Hospital is a 148 bed facility.

10/21/88

BI-COUNTY COMMUNITY HOSPITAL

13355 E TEN MILE RD
WARREN, MI 48089

Medicare Hospital Provider Number: 230204

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,653	15	11 - 15	1,742	16	11 - 16
Cancer	51	51	30 - 60	67	54	31 - 59
Cerebrovascular Accidents	68	31	16 - 39	68	38	19 - 43
Gastrointestinal Catastrophes	23	30	14 - 54	13	46	14 - 66
Infectious Disease	17	18	16 - 56	13	23	14 - 61
Metabolic/Electrolyte Disorders	20	40	7 - 53	25	24	13 - 50
Pulmonary Disease	94	46	19 - 41	105	38	19 - 41
Renal Failure	15	33	12 - 69	5	40	13 - 87
Severe Acute Heart Disease	73	30	25 - 48	78	47	29 - 53
Severe Chronic Heart Disease	135	27	15 - 31	143	26	15 - 32
Severe Trauma	4	100	4 - 71	0	-	-
Gastrointestinal Disease	96	7	1 - 16	110	9	1 - 17
Gynecologic Disease	18	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	270	2	2 - 6	241	4	2 - 7
Musculoskeletal/Skin Conditions	121	2	0 - 10	144	3	0 - 10
Neuropsychiatric/Sensory Disease	30	0	0 - 31	21	0	0 - 63
Urologic Disease	83	0	1 - 7	72	1	0 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	247
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	166
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	0
Registered Nurses:	136
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Bi-County Community Hospital (Osteopathic)
AN AFFILIATE OF HORIZON HEALTH SYSTEMS

October 18, 1988

Medicare Identification #230204

Health Care Financing Administration
Health Standards & Quality Bureau
Hospital Mortality Information
P.O. Box 26684
Baltimore, Maryland 21207

A RESPONSE TO THE HCFA MEDICARE MORTALITY DATA

The HCFA released data for our hospital specific characteristics are incorrect. Bi-County Community Hospital is an acute care facility with 247 beds (not 204), with a special care unit (intensive and coronary care). We have a full service Emergency Department with specialists available around the clock. We also have many subspecialists on staff whose primary practice site is at Bi-County Community Hospital. Many of our physicians are participating physicians at local extended care facilities. As a result, a higher percentage of our Medicare admissions are transferred from nursing homes. Therefore, the more severely ill patient is being attracted and admitted to our hospital. This is confirmed by the Michigan Hospital Association statistics that show Bi-County Community Hospital as having 8% more cases with one or more co-morbidities than the state average. Co-morbidities are the presence of additional medical conditions that further complicate the treatment of the patients and reflect a higher severity of illness index. We are a hospital that honors the NO CODE/DO NOT RESUSCITATE requests of family members.

The HCFA Mortality rates alone do not constitute an appropriate measure of quality of care and is, in fact, a statistical review of number of cases. In keeping with our own quality standards, a comparative review of HCFA's 1987 Mortality data to our 1986 data shows that, within 1987, 10 of the 16 mortality categories our mortality rate decreased, with two categories staying the same showing no mortalities.

In one category (Severe Trauma), our mortality rate was 100% but actually only consisted of only four (4) cases. Each of these four patients were severely ill. One case was a severe motor vehicle accident, two cases were severe head traumas and one was an ingestion of a foreign body with cardio-pulmonary arrest at home (arrived in our Emergency Room in full CPR).

13355 East Ten Mile Road
Warren, Michigan 48089
313-759-7300

In the other category (Pulmonary Diseases), our mortality rate was higher than the predicted rate. However, these patients had 5% more co-morbidities than the state average. Their average age was 81 years. All of these cases were various forms of pneumonia including aspiration pneumonia due to inhalation of food or vomitus. Fifty-six percent (56%) of the cases were transfers from extended care facility. This indicates the patients are sedentary and prone to having multiple medical conditions with a short life expectancy. Twenty-three percent (23%) of these cases expired within forty-eight (48) hours of admission which indicates how acutely ill these patients were.

Bi-County Community Hospital has an ongoing Quality Assessment program which includes mortality review by all clinical departments. All cases in which death occurs undergo internal peer review for appropriateness and quality of care.

Respectfully submitted,

Gary W. Popiel

Gary W. Popiel, Vice President/Administrator
Administration

LMC/DK/gp/jmp

BLODGETT MEMORIAL MEDICAL CENTER

1840 WEALTHY ST S E
GRAND RAPIDS, MI 49506

Medicare Hospital Provider Number: 230032

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,918	10	9 - 13	2,917	9	9 - 13
Cancer	123	36	31 - 53	123	30	30 - 51
Cerebrovascular Accidents	94	21	18 - 37	90	24	18 - 37
Gastrointestinal Catastrophes	37	35	19 - 54	39	31	19 - 52
Infectious Disease	18	50	13 - 59	14	14	17 - 59
Metabolic/Electrolyte Disorders	29	31	12 - 49	22	18	11 - 48
Pulmonary Disease	103	32	17 - 37	100	25	18 - 38
Renal Failure	11	36	17 - 78	7	14	10 - 74
Severe Acute Heart Disease	111	31	27 - 47	113	41	28 - 48
Severe Chronic Heart Disease	115	23	16 - 33	96	24	13 - 32
Severe Trauma	17	41	10 - 58	11	36	14 - 69
Gastrointestinal Disease	173	5	1 - 10	175	3	1 - 8
Gynecologic Disease	32	0	0 - 69	31	0	0 -100
Low-Risk Heart Disease	453	4	2 - 6	458	3	2 - 6
Musculoskeletal/Skin Conditions	405	1	1 - 4	407	1	1 - 4
Neuropsychiatric/Sensory Disease	118	1	1 - 7	155	1	1 - 6
Urologic Disease	116	1	0 - 8	100	2	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	343
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	227
Percent of Physicians Who Are Board Certified Specialists:	99
Interns and Residents:	0
Registered Nurses:	464
Licensed Practical Nurses:	67

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Blodgett
Memorial Medical Center

October 20, 1988 Hospital Provider #: 2300032

William L. Roper, M.D., Administrator
Health Care Financing Administration
Washington, DC 20201

Dear Dr. Roper:

Thank you for the opportunity to review the mortality information on Medicare patients treated at our hospital in 1987. The following information should help put Blodgett Memorial Medical Center's mortality rates in perspective.

Hospital Characteristics

Blodgett is a 410-bed community teaching hospital. The hospital is licensed for 285 adult medical-surgical beds, 44 adult critical care beds, 44 obstetrical beds and 34 pediatric beds. We have 553 registered nurse full time equivalents (FTE's) and 83 medical resident FTE's staffing 343 beds.

Our medical staff is comprised of 227 members classified as active staff. 96% of the active staff are board certified in their specialty. 25% of the inpatient admissions come from outside our primary market area. A significant portion of these patient referrals are for cardiovascular, neurological or orthopedic diseases and disorders.

Due to the number of sub-specialty physicians and the number of patient referrals from other communities, the mix of patients treated at Blodgett Memorial Medical Center is more complex in nature than the average. One indicator of this is the CMI (Case Mix Index). This is a comparative statistic published by HCFA which measures the relative complexity of Medicare patients admitted to a hospital as compared to the national average. Blodgett's current CMI is 1.60 (F.R. 9-30-88), meaning that our mix of patients is 60% more complex than the national average.

Mortality Data Verification

The mortality data reported by HCFA indicated there were 300 Medicare deaths within 30 days of admission. We were able to verify 225 of these to be in-hospital deaths. The remaining 75 deaths occurred after hospitalization which we did not verify. HCFA reports a total of 2,918 Medicare patients were admitted one or more times during 1987. Our records indicate that there were 3,346 admitted one or more times during 1987.

We identified the following discrepancies in the mortality data: two patients died in our hospital but were listed as still alive by HCFA; five patients died in our hospital but were reported as dying sometime after discharge; ten patients died in our hospital but were not reported as even

being admitted. A listing of these occurrences is attached. Using our corrected figures, we actually had 312 deaths within 30 days for 3,346 patients. This is a 9% rate instead of the 10% rate HCFA reported.

Mortality Rate Analysis by HCFA

The analytical model used by HCFA measures the relationship between death and a selected group of patient characteristics. Severity of illness is not one of these characteristics since this information is not available to HCFA (see Federal Register, August 19, 1987, p. 30742). Since not all of the significant characteristics which could contribute to death have been measured, the ability to predict the likelihood of death is limited. The analysis can serve as an initial screen to be used by medical peer review groups, but should not to be used alone as an indicator of the quality of patient care.

However, we are pleased with your preliminary result which reflects an actual overall rate of 10% compared to the expected range of 9 to 13%. We are proud of this positive result and remain committed to even further improvement.

Hospital Use of Data

Blodgett has an ongoing quality assurance program which has a dual goal of monitoring the quality and appropriateness of patient care and of taking action whenever opportunities to improve that care are identified. Mortality rates are one of the many aspects of patient care that are continually monitored. Data from external sources, such as the HCFA Mortality Rates, are welcomed and are integrated into our internal data systems for review by the medical staff. More specifically, the HCFA data will undergo peer review by the physicians to evaluate factors affecting severity of illness, to determine the relationships of the principal diagnosis (used by HCFA to classify patients) to the actual cause of death, and to identify any patterns or trends that may benefit from indepth analysis.

Blodgett's Board of Trustees, medical staff and administration remain committed to continually assessing and improving its services to the Medicare population as well as all other patients who seek medical care at our institution.

Sincerely,

Terrence M. O'Rourke
President

/blm

BON SECOURS HOSPITAL

468 CADIEUX RD
DETROIT, MI 48230

Medicare Hospital Provider Number: 230089

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,070	11	10 - 14	3,342	12	10 - 14
Cancer	107	47	28 - 52	96	43	30 - 54
Cerebrovascular Accidents	106	22	19 - 36	146	27	22 - 38
Gastrointestinal Catastrophes	26	42	22 - 62	25	52	17 - 58
Infectious Disease	44	45	21 - 54	53	49	22 - 53
Metabolic/Electrolyte Disorders	44	25	13 - 44	68	22	14 - 40
Pulmonary Disease	179	27	19 - 36	168	33	20 - 37
Renal Failure	13	15	17 - 71	9	56	17 - 82
Severe Acute Heart Disease	97	39	31 - 52	99	37	31 - 52
Severe Chronic Heart Disease	175	26	18 - 33	174	25	18 - 33
Severe Trauma	6	17	7 - 70	3	0	3 - 80
Gastrointestinal Disease	243	2	2 - 6	273	3	1 - 7
Gynecologic Disease	29	0	0 -100	24	0	0 -100
Low-Risk Heart Disease	397	2	2 - 6	438	3	2 - 5
Musculoskeletal/Skin Conditions	329	2	1 - 5	362	4	1 - 6
Neuropsychiatric/Sensory Disease	123	2	1 - 10	165	2	0 - 9
Urologic Disease	122	1	0 - 7	109	3	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	311
Occupancy Rate (%):	72
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	196
Percent of Physicians Who Are Board Certified Specialists:	94
Interns and Residents:	31
Registered Nurses:	210
Licensed Practical Nurses:	95

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

BORGESS MED CTR

1521 GULL ROAD
KALAMAZOO, MI 49001

Medicare Hospital Provider Number: 230117

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,450	12	10 - 14	3,453	11	10 - 14
Cancer	149	40	30 - 50	139	45	32 - 54
Cerebrovascular Accidents	161	18	19 - 33	104	22	18 - 36
Gastrointestinal Catastrophes	39	33	19 - 53	48	27	21 - 51
Infectious Disease	19	37	17 - 60	34	35	19 - 54
Metabolic/Electrolyte Disorders	26	35	11 - 51	29	10	14 - 43
Pulmonary Disease	126	25	17 - 36	127	19	15 - 32
Renal Failure	47	13	11 - 56	33	27	13 - 63
Severe Acute Heart Disease	183	21	27 - 43	177	28	30 - 46
Severe Chronic Heart Disease	220	29	16 - 30	193	20	15 - 28
Severe Trauma	8	38	9 - 71	16	31	11 - 59
Gastrointestinal Disease	179	2	1 - 7	167	5	1 - 10
Gynecologic Disease	16	0	0 -100	23	0	0 -100
Low-Risk Heart Disease	648	6	2 - 6	694	3	2 - 6
Musculoskeletal/Skin Conditions	402	2	1 - 5	396	2	1 - 5
Neuropsychiatric/Sensory Disease	62	3	0 - 22	92	2	1 - 11
Urologic Disease	90	1	0 - 15	100	2	0 - 12

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	436
Occupancy Rate (%):	79
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	329
Percent of Physicians Who Are Board Certified Specialists:	89
Interns and Residents:	0
Registered Nurses:	544
Licensed Practical Nurses:	112

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

Borgess Medical Center
1521 Gull Road
Kalamazoo, Michigan 49001
Telephone 616-383-7000

Member of
Sisters of St. Joseph
Health System, Inc.
Nazareth, Michigan

BORGESS
Medical Center

Hospital ID: 230117

Borgess Medical Center (BMC) has reviewed the Medical Hospital Mortality Information (1987). In addition, we have reviewed our experience with 18,288 total inpatient stays in the calendar year 1987, which included a total of 5,926 medicare stays (32%). While less than on-third of the BMC patients were Medicare patients, more than two-thirds (69%) of the deaths occurred in these inpatients.

Twenty-two (22) percent of the deaths attributed to BMC in the Medicare Hospital Mortality Information (1987) occurred an average of 11.25 days after the patients were discharged from the hospital. The specific cause of death in these patients has not been determined. However, they represented all of the deaths in 2 of the 16 diagnostic categories (neuropsychiatric and sensory disease, urologic disease).

Mortality information compiled at BMC was further analyzed using the same computer assisted severity-of-illness data system utilized by HCFA. This system places patients at the time of admission into one of five severity-of-illness categories. These categories are based, both on the potential for organ failure at the time of admission, as well as the potential for response to treatment. The lowest severity group is group zero patients which have no potential for organ failure and the greatest potential to respond to treatment. In the highest severity group (group four), the converse is true. Organ failure is already present, and minimal response to treatment is expected. The average severity for all Medicare inpatients discharged in 1987 was 1.40. The average severity for Medicare patients who died was significantly higher at 2.43.

Comparing the Medicare Hospital Mortality Information (1987) with similar information for 1986 reveals a reduction in death rate from cancer, cerebrovascular accidents (stroke), severe acute heart disease and renal failure ranging from 11% to 51%. Further reductions were noted in two other categories. The rates were identical in two additional categories. Rates were higher in 8 of the 16 categories, though below the top range for predicted mortality in every one of the diagnostic categories.

BOTSFORD GEN HOSP

28050 GRAND ST
FARMINGTON, MI 48024

Medicare Hospital Provider Number: 230151

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,024	17	11 - 16	1,982	17	11 - 16
Cancer	84	35	28 - 52	76	50	26 - 52
Cerebrovascular Accidents	81	31	17 - 39	78	33	18 - 41
Gastrointestinal Catastrophes	26	54	16 - 57	22	32	18 - 59
Infectious Disease	16	38	16 - 63	20	60	18 - 62
Metabolic/Electrolyte Disorders	47	40	13 - 46	68	35	15 - 43
Pulmonary Disease	115	39	21 - 41	114	34	19 - 39
Renal Failure	11	45	11 - 74	9	56	17 - 82
Severe Acute Heart Disease	86	44	28 - 51	72	40	25 - 50
Severe Chronic Heart Disease	128	29	16 - 34	135	32	14 - 32
Severe Trauma	4	25	5 - 80	6	17	6 - 70
Gastrointestinal Disease	143	5	1 - 11	138	4	1 - 9
Gynecologic Disease	18	0	0 -100	26	0	0 -100
Low-Risk Heart Disease	223	8	1 - 10	213	7	1 - 9
Musculoskeletal/Skin Conditions	160	4	0 - 11	140	2	0 - 9
Neuropsychiatric/Sensory Disease	44	2	0 - 46	61	0	0 - 11
Urologic Disease	76	0	0 - 10	73	1	0 - 28

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	300
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	208
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	85
Registered Nurses:	261
Licensed Practical Nurses:	46

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COMMENTS ON THE HEALTH CARE FINANCING ADMINISTRATION MORTALITY DATA



October 21, 1988

Hospital Medicare ID number 230151

INTRODUCTION

Health Care Financing Administration's (HCFA) mortality information was reported based on 16 diagnostic categories. Our hospital's mortality rate falls within the predicted mortality rate for ALL of the 16 individual categories. However, our predicted mortality rate for all causes, as calculated by HCFA based on last hospital admission, was 16.7%, which falls just outside their predicted range of 11-16%. There are additional factors which account for this unusual statistical variance when our mortality rate falls within the predicted range for all of their 16 diagnostic categories. The severity of illness is the most significant factor that has not been taken into account. The Case Mix Index (CMI) is an indicator of severity of illness. The average CMI is 1.00. Our CMI in 1987 was 1.31. This indicates that our patients were more severely ill than those admitted to other hospitals. On recalculating our hospital mortality rate, based on total Medicare admissions of 3,258, our actual rate was 10.4%. This differs considerably from the 16.7% mortality rate calculated based on last hospital admission only.

DATA VERIFICATION

The information contained in this report refers to Medicare admissions only. The data provided to us by HCFA indicates that a total of 339 Medicare patients, whose last discharge in 1987 was from our hospital, expired within 30 days of admission to our institution. Of these reported deaths, 295 were listed as occurring during the hospital stay, while 44 were reported as occurring following discharge from our hospital. In these 44 cases, we did not determine any relationship between the cause of death and the last admission to our hospital because information concerning the exact cause of death was not provided to us. However, what we have determined from a review of our records discloses that:

- 100% had multiple hospitalizations
- 100% had been admitted through the emergency department
- 100% had multiple co-morbidities
- 100% had an unfavorable prognosis on discharge
- 75% were discharged to Extended Care Facilities

HCFA's mortality information is based on the last hospital admission of the year for all Medicare beneficiaries admitted during 1987. They report a total of 2,024 cases based on the last hospital admission only. Our records indicate that a total of 3,258 Medicare admissions occurred at our institution in 1987. The discrepancy reflects multiple admissions during that year.

RESULTS OF MEDICARE RECORD REVIEW

We have reviewed the medical records of all 339 Medicare patients admitted during 1987 who died within 30 days of admission to our hospital. The following information is significant in that it takes into account additional factors that a crude mortality rate, such as that used by HCFA, does not incorporate.

PATIENT'S AGE

The average patient age for our 339 mortalities was 80 years. Additionally, 119 of these 339 patients, or 35%, were 85 years of age or older.

REFERRAL FROM EXTENDED CARE FACILITIES

Of our 339 reported Medicare deaths, 121 or 36%, of these patients were transferred to our institution from an Extended Care Facility. The fact that these elderly Americans already required professional nursing services would suggest their health status was compromised prior to hospital admission. Their resilience to battle disease would certainly be expected to be impaired.

CO-MORBIDITY

Our patients displayed a significant rate of co-morbidity factors. Co-morbidity factors are additional pre-existing medical problems complicating the patient's primary illness. Severity of co-morbid disease is linked to risk of mortality. Even utilizing HCFA's very conservative approach to assessing co-morbidity, our patients displayed an average co-morbidity factor of 2. This means that on an average, each of our 339 Medicare patients that expired, had two additional major organ systems involved in disease in addition to the primary disorder which necessitated admission to the hospital. This would suggest that our patient population was suffering significant illness with multiple organ involvement at the time of admission.

DO NOT RESUSCITATE OR NO-CODE ORDERS

235, or 69%, of our Medicare reported deaths had an order on the medical record that no resuscitative measures be instituted. In the context of our hospital policy, this means that a physician has determined that the patient's condition is such that death is imminent and that the family has indicated that no resuscitative measures be instituted. This suggests that a significant proportion of our Medicare deaths occurred in patients who were considered to be in the terminal phase of their disease process.

SUMMARY

The mortality rates reported by HCFA include many variables which have not been taken into account, as reflected by the preceding information which we have provided. Our review suggests that in all cases the patient expired as a natural outcome of their disease process. In addition, there is no medical authoritative organization that has suggested a direct correlation between mortality rates and the quality of medical care provided at a health care institution. We sincerely hope that the mortality rates, as HCFA has reported them, will not cause unnecessary and undo concern among patients who may feel that this inappropriately represents a correlation with the quality of care they might receive at a particular health care institution. We feel that considerable refinement of the HCFA methodology is necessary before a relationship between mortality rates and quality of health care can be defined.

Our institution is committed to delivering appropriate high quality medical and surgical care to each and every patient. We stand behind our commitment and are willing to deal, on a case specific basis, with any concerns regarding care delivered to any of our patients. A hospital wide Quality Assessment Program reviews all aspects of care which we provide to our patients. Included within this Quality Assessment Program has been an intensified review of all patient deaths by the appropriate medical staff department. This has enhanced our ability to continually monitor the care which we provide and ensure that appropriate standards for quality are maintained.

BRENT GENERAL HOSPITAL

16260 DEXTER
DETROIT, MI 48221

Medicare Hospital Provider Number: 230067

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	62	3	1 - 15	72	4	2 - 14
Cancer	2	0	1 - 91	1	0	0 - 98
Cerebrovascular Accidents	0	-	-	1	0	0 - 99
Gastrointestinal Catastrophes	3	0	3 - 80	1	0	0 - 98
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	1	0	0 -100	4	0	0 - 89
Pulmonary Disease	1	0	0 -100	2	0	0 - 99
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	4	25	2 - 81
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	6	0	0 -100	5	0	0 -100
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	2	0	0 -100	9	0	0 -100
Musculoskeletal/Skin Conditions	7	0	0 -100	9	0	0 -100
Neuropsychiatric/Sensory Disease	3	0	0 -100	3	0	0 -100
Urologic Disease	16	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	116
Occupancy Rate (%):	8
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	63
Percent of Physicians Who Are Board Certified Specialists:	29
Interns and Residents:	0
Registered Nurses:	26
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BRONSON METHODIST HOSPITAL

252 EAST LOVELL STREET
KALAMAZOO, MI 49006

Medicare Hospital Provider Number: 230017

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,481	12	10 - 14	2,696	12	10 - 15
Cancer	105	32	28 - 50	122	36	29 - 51
Cerebrovascular Accidents	89	30	17 - 38	75	36	17 - 40
Gastrointestinal Catastrophes	44	30	20 - 52	39	36	18 - 52
Infectious Disease	23	39	18 - 59	38	42	21 - 55
Metabolic/Electrolyte Disorders	47	17	11 - 40	55	18	11 - 38
Pulmonary Disease	130	22	14 - 32	130	25	17 - 35
Renal Failure	6	17	9 - 76	9	22	12 - 74
Severe Acute Heart Disease	116	41	28 - 48	120	42	30 - 50
Severe Chronic Heart Disease	100	26	15 - 34	101	27	17 - 35
Severe Trauma	2	0	3 - 88	4	25	1 - 84
Gastrointestinal Disease	154	3	1 - 9	187	2	1 - 7
Gynecologic Disease	38	0	0 -100	27	0	0 - 94
Low-Risk Heart Disease	295	6	1 - 8	277	3	2 - 7
Musculoskeletal/Skin Conditions	287	2	1 - 6	254	0	1 - 4
Neuropsychiatric/Sensory Disease	54	7	1 - 21	81	5	0 - 21
Urologic Disease	119	6	0 - 22	122	2	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	442
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	363
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	534
Licensed Practical Nurses:	89

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

BRONSON
Methodist Hospital

Executive Offices

Hospital Medicare ID Number 230017
Response to HCFA 1987 mortality figures

Bronson Methodist Hospital has received and reviewed mortality data for the 297 Medicare patients who HCFA reported died 30 days post admission to Bronson in 1987. The records of all these individuals have been reviewed by members of the hospital's medical staff and Quality Assurance committee.

While Bronson does not regard mortality figures as a sole indicator of quality, and we continue to question the overall integrity of data of this nature, we do appreciate the opportunity to incorporate the HCFA report into the hospital's quality assurance process. Since the 1986 HCFA release of data, Bronson has enhanced its quality assurance process through the implementation of concurrent review for all Medicare patients. Any trends or patterns which arise from the HCFA data, through the concurrent review process or any other means, will receive immediate attention.

Our preliminary review indicates that quality care was rendered to these patients. We have seen that of the 297 deaths, 93 occurred after discharge from Bronson, with the vast majority having been discharged at the end stage of illness due to patient and family choice. Of the total 297 in-hospital and post-discharge deaths, 70 percent were persons whose physician, family and, when able, themselves made the decision to not resuscitate in the event of cardiac arrest. (Of note is the increase in deaths occurring outside the hospital between 1986 and 1987. We see this as indicative of two trends: more families and patients choosing home care for end stage illness and changes in reimbursement patterns for in-hospital care for terminal illness.)

In addition, we wish to provide the following additional information concerning those Medicare patients who died after last admission to Bronson. The vast majority of patients whose records were reviewed were critically ill or injured upon admission to Bronson, with 50 percent having one or more additional complicating diseases (comorbidities). The greatest number of those who died were admitted at the end stage of a terminal disease.

The fact that a high percentage of Bronson's Medicare patients were severely ill may be explained by the type of services Bronson Methodist Hospital provides. A 456-bed regional medical center serving southwest Michigan, Bronson has a high percentage of beds

devoted to critical care services. The hospital's critical care services include an adult intensive care unit, medical and surgical cardiac intensive care units, an inpatient trauma care unit, a regional burn center, a regional trauma and emergency center and four mobile critical care transport units providing helicopter and ground transport.

BRONSON VICKSBURG HOSPITAL

13226 NORTH BLVD
VICKSBURG, MI 49097

Medicare Hospital Provider Number: 230190

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	88	10	6 - 20	128	12	8 - 20
Cancer	1	0	2 - 98	1	100	1 - 97
Cerebrovascular Accidents	3	67	8 - 89	6	33	8 - 74
Gastrointestinal Catastrophes	0	-	-	1	0	1 - 97
Infectious Disease	1	0	0 - 98	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	4	50	2 - 82
Pulmonary Disease	5	40	5 - 77	10	50	7 - 65
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	2	0	6 - 89	2	0	8 - 91
Severe Chronic Heart Disease	3	67	1 - 88	11	36	5 - 60
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	9	0	0 - 99	7	0	0 -100
Gynecologic Disease	0	-	-	2	0	0 -100
Low-Risk Heart Disease	10	0	0 - 97	9	0	0 - 94
Musculoskeletal/Skin Conditions	5	20	0 -100	8	0	0 -100
Neuropsychiatric/Sensory Disease	2	0	0 -100	2	0	0 -100
Urologic Disease	5	0	0 -100	4	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	41
Occupancy Rate (%):	29
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	29
Percent of Physicians Who Are Board Certified Specialists:	14
Interns and Residents:	0
Registered Nurses:	12
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BRONSON
VICKSBURG
HOSPITAL

Hospital Medicare ID number 230190
Response to HCFA mortality rates

Bronson Vicksburg Hospital has received and reviewed mortality data for the 9 patients who HCFA reported died 30 days post admission to Bronson Vicksburg in 1987. The records of all these individuals have been reviewed by members of the hospital's medical staff and Quality Assurance committee.

While Bronson Vicksburg does not regard mortality figures as a sole indicator of quality, and we do continue to question the integrity of data of this nature, we do appreciate the opportunity to incorporate the HCFA report into the hospital's quality assurance process, which includes concurrent review for all Medicare patients. Any trends or patterns which arise from the HCFA data, through the concurrent review process or any other means, will receive immediate attention. Our preliminary review indicates that quality care was delivered to all of these patients.

13326 NORTH BOULEVARD
VICKSBURG, MICHIGAN 49097
616/649-2321

BURON VALLEY HOSPITAL

1601 EAST COMMERCE ROAD
MILFORD, MI 48042

Medicare Hospital Provider Number: 230277

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	608	14	10 - 16	392	11	10 - 17
Cancer	11	64	18 - 72	9	44	16 - 74
Cerebrovascular Accidents	24	29	10 - 47	19	11	16 - 48
Gastrointestinal Catastrophes	4	50	7 - 83	4	0	6 - 71
Infectious Disease	9	33	13 - 70	8	25	14 - 72
Metabolic/Electrolyte Disorders	21	33	10 - 53	13	0	11 - 43
Pulmonary Disease	28	21	10 - 43	20	25	11 - 50
Renal Failure	2	50	6 - 94	1	100	2 - 97
Severe Acute Heart Disease	38	39	23 - 55	25	40	23 - 60
Severe Chronic Heart Disease	42	14	11 - 34	19	16	8 - 44
Severe Trauma	2	0	1 - 90	0	-	-
Gastrointestinal Disease	49	0	1 - 11	25	0	0 - 33
Gynecologic Disease	5	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	92	4	1 - 13	57	4	1 - 16
Musculoskeletal/Skin Conditions	45	0	0 - 15	23	4	0 - 91
Neuropsychiatric/Sensory Disease	9	11	0 -100	4	0	0 - 96
Urologic Disease	32	3	0 - 38	19	5	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	83
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	70
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

BUTTERWORTH HOSPITAL

100 MICHIGAN N E
GRAND RAPIDS, MI 49503

Medicare Hospital Provider Number: 230038

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,979	11	10 - 14	3,701	12	11 - 15
Cancer	221	38	32 - 51	217	38	33 - 53
Cerebrovascular Accidents	140	25	18 - 34	150	27	20 - 37
Gastrointestinal Catastrophes	39	36	21 - 55	37	43	14 - 50
Infectious Disease	33	33	17 - 52	26	31	25 - 62
Metabolic/Electrolyte Disorders	49	31	14 - 45	51	20	12 - 40
Pulmonary Disease	157	22	19 - 36	171	22	17 - 33
Renal Failure	19	42	18 - 72	12	42	18 - 79
Severe Acute Heart Disease	162	28	30 - 47	179	32	31 - 48
Severe Chronic Heart Disease	156	20	16 - 31	146	29	16 - 32
Severe Trauma	5	40	4 - 78	11	9	10 - 55
Gastrointestinal Disease	284	2	2 - 6	218	2	1 - 6
Gynecologic Disease	59	0	0 - 99	51	2	0 - 60
Low-Risk Heart Disease	536	6	1 - 6	447	6	2 - 7
Musculoskeletal/Skin Conditions	436	2	1 - 5	340	3	1 - 6
Neuropsychiatric/Sensory Disease	88	2	0 - 12	98	4	0 - 15
Urologic Disease	291	1	0 - 6	206	1	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	529
Occupancy Rate (%):	81
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	334
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	91
Registered Nurses:	782
Licensed Practical Nurses:	95

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CALUMET PUBLIC HOSPITAL

205 OSCEOLA STREET
LAURIUM, MI 49913

Medicare Hospital Provider Number: 230145

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	478	13	10 - 17	483	12	10 - 17
Cancer	17	71	24 - 67	15	53	17 - 65
Cerebrovascular Accidents	22	23	12 - 48	31	26	16 - 48
Gastrointestinal Catastrophes	4	25	6 - 80	3	33	10 - 91
Infectious Disease	7	14	10 - 67	3	100	9 - 82
Metabolic/Electrolyte Disorders	5	0	5 - 64	18	11	12 - 48
Pulmonary Disease	37	22	14 - 43	20	30	11 - 52
Renal Failure	3	0	8 - 83	3	33	11 - 94
Severe Acute Heart Disease	13	31	18 - 66	22	32	22 - 60
Severe Chronic Heart Disease	35	26	12 - 42	31	26	10 - 42
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	31	0	0 - 20	49	4	0 - 37
Gynecologic Disease	4	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	44	5	1 - 22	40	0	1 - 13
Musculoskeletal/Skin Conditions	32	3	0 - 32	35	11	1 - 36
Neuropsychiatric/Sensory Disease	26	12	0 - 67	26	0	0 - 30
Urologic Disease	25	0	0 - 94	23	0	0 - 53

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	48
Occupancy Rate (%):	40
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	12
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	0
Registered Nurses:	38
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CARO COMMUNITY HOSP

401 N HOOPER ST
CARO, MI 48723

Medicare Hospital Provider Number: 230235

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	278	12	8 - 17	265	11	7 - 16
Cancer	5	40	12 - 83	5	60	5 - 78
Cerebrovascular Accidents	10	40	13 - 68	9	11	8 - 57
Gastrointestinal Catastrophes	1	100	3 -100	0	-	-
Infectious Disease	6	17	9 - 71	0	-	-
Metabolic/Electrolyte Disorders	6	33	6 - 74	2	50	5 - 93
Pulmonary Disease	12	8	10 - 50	10	30	9 - 64
Renal Failure	0	-	-	1	100	3 - 98
Severe Acute Heart Disease	7	71	24 - 85	16	38	18 - 63
Severe Chronic Heart Disease	23	26	7 - 45	10	20	3 - 58
Severe Trauma	0	-	-	1	0	0 - 97
Gastrointestinal Disease	26	8	0 - 88	25	4	0 - 36
Gynecologic Disease	1	0	0 -100	0	-	-
Low-Risk Heart Disease	54	2	0 - 15	56	0	1 - 9
Musculoskeletal/Skin Conditions	12	8	0 - 95	19	0	0 - 34
Neuropsychiatric/Sensory Disease	9	0	0 -100	6	0	0 -100
Urologic Disease	20	0	0 - 59	16	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	46
Occupancy Rate (%):	24
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	17
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	18
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CARSON CITY HOSPITAL

ELM AT 3RD ST
CARSON CITY, MI 48811

Medicare Hospital Provider Number: 230208

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	399	13	9 - 16	358	16	9 - 17
Cancer	8	50	16 - 77	12	67	22 - 73
Cerebrovascular Accidents	15	33	10 - 56	10	40	10 - 66
Gastrointestinal Catastrophes	5	20	5 - 74	6	50	5 - 75
Infectious Disease	12	42	11 - 64	6	33	8 - 75
Metabolic/Electrolyte Disorders	4	25	0 - 88	2	50	1 - 94
Pulmonary Disease	21	14	9 - 43	24	25	13 - 49
Renal Failure	6	50	13 - 84	6	83	17 - 84
Severe Acute Heart Disease	16	31	19 - 63	17	29	17 - 60
Severe Chronic Heart Disease	38	16	10 - 35	26	35	7 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	25	0	0 - 39	28	0	0 - 28
Gynecologic Disease	9	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	32	6	0 - 53	33	6	0 - 43
Musculoskeletal/Skin Conditions	48	6	0 - 82	44	2	0 - 47
Neuropsychiatric/Sensory Disease	8	0	0 -100	4	0	0 -100
Urologic Disease	19	0	0 - 97	24	0	0 - 89

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	81
Occupancy Rate (%):	51
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	32
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	5
Registered Nurses:	44
Licensed Practical Nurses:	33

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CENTRAL MICHIGAN COMMUNITY HOSPITAL

1221 SOUTH DRIVE
MOUNT PLEASANT, MI 48858

Medicare Hospital Provider Number: 230080

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	852	12	9 - 15	896	12	9 - 15
Cancer	18	72	22 - 64	17	47	25 - 71
Cerebrovascular Accidents	37	22	16 - 43	24	29	15 - 52
Gastrointestinal Catastrophes	2	50	3 - 92	7	29	7 - 70
Infectious Disease	7	14	10 - 67	7	29	8 - 71
Metabolic/Electrolyte Disorders	5	20	7 - 75	5	40	3 - 78
Pulmonary Disease	51	25	14 - 40	60	38	16 - 43
Renal Failure	4	50	10 - 88	3	67	11 - 93
Severe Acute Heart Disease	41	39	23 - 54	46	37	24 - 52
Severe Chronic Heart Disease	42	26	13 - 40	46	37	11 - 39
Severe Trauma	2	0	2 - 89	0	-	-
Gastrointestinal Disease	63	5	1 - 18	67	6	0 - 22
Gynecologic Disease	8	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	92	4	1 - 13	107	5	1 - 12
Musculoskeletal/Skin Conditions	91	5	0 - 20	91	0	1 - 6
Neuropsychiatric/Sensory Disease	18	0	0 - 52	27	0	0 - 60
Urologic Disease	57	0	0 - 12	65	2	0 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	120
Occupancy Rate (%):	55
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	36
Percent of Physicians Who Are Board Certified Specialists:	47
Interns and Residents:	0
Registered Nurses:	97
Licensed Practical Nurses:	25

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CHARLEVOIX AREA HOSP

LAKE SHORE DRIVE
CHARLEVOIX, MI 49720

Medicare Hospital Provider Number: 230124

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	336	11	8 - 15	344	9	8 - 15
Cancer	2	50	8 - 97	9	44	17 - 75
Cerebrovascular Accidents	11	9	8 - 50	12	8	12 - 51
Gastrointestinal Catastrophes	3	67	7 - 88	3	0	5 - 79
Infectious Disease	1	0	0 -100	2	0	3 - 88
Metabolic/Electrolyte Disorders	6	50	2 - 76	8	38	2 - 70
Pulmonary Disease	26	19	14 - 47	21	19	14 - 50
Renal Failure	1	100	2 - 97	0	-	-
Severe Acute Heart Disease	14	50	20 - 69	17	41	19 - 64
Severe Chronic Heart Disease	12	17	7 - 53	16	13	9 - 45
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	38	8	0 - 38	41	2	0 - 24
Gynecologic Disease	3	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	39	0	0 - 17	50	2	1 - 15
Musculoskeletal/Skin Conditions	29	3	0 - 44	34	0	0 - 21
Neuropsychiatric/Sensory Disease	6	0	0 -100	7	0	0 -100
Urologic Disease	19	5	0 - 94	10	0	0 - 97

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	44
Occupancy Rate (%):	41
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	18
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	0
Registered Nurses:	32
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CHELSEA COMMUNITY HOSPITAL

775 S MAIN ST
CHELSEA, MI 48118

Medicare Hospital Provider Number: 230259

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	473	12	10 - 17	487	12	10 - 17
Cancer	8	50	12 - 73	7	71	18 - 79
Cerebrovascular Accidents	23	17	16 - 48	23	30	15 - 52
Gastrointestinal Catastrophes	1	100	2 - 97	2	50	6 - 95
Infectious Disease	9	44	10 - 69	13	15	16 - 59
Metabolic/Electrolyte Disorders	3	33	2 - 86	11	27	6 - 60
Pulmonary Disease	34	32	13 - 45	33	24	14 - 45
Renal Failure	2	50	7 - 96	1	100	3 - 98
Severe Acute Heart Disease	32	34	24 - 58	27	37	23 - 59
Severe Chronic Heart Disease	33	9	14 - 37	24	21	13 - 47
Severe Trauma	0	-	-	1	0	2 - 97
Gastrointestinal Disease	38	5	0 - 32	25	0	0 - 31
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	52	2	1 - 15	53	0	1 - 10
Musculoskeletal/Skin Conditions	21	5	0 - 81	31	6	0 - 72
Neuropsychiatric/Sensory Disease	37	0	0 - 24	34	0	0 - 31
Urologic Disease	31	10	0 - 91	40	0	0 - 40

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	137
Occupancy Rate (%):	63
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	112
Percent of Physicians Who Are Board Certified Specialists:	96
Interns and Residents:	0
Registered Nurses:	108
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Chelsea
Community
Hospital

775 South Main Street
Chelsea, Michigan 48118-1399
(313) 475-1311

Medicare Provider Number: 230259

October 19, 1988

Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Mrs. Sandra Kappert

Dear Mrs. Kappert,

Chelsea Community Hospital has reviewed our Medicare Hospital Mortality Information to be published by HCFA. We would like to respond to the section on hospital characteristics as interpreted by HCFA from data submitted through the AHA 1986 Annual Survey of Hospitals.

Chelsea Community Hospital would like to correct the hospital characteristics to the following:

HOSPITAL CHARACTERISTICS

Survey and Year: AHA 1986

Total number of beds:	137
Occupancy Rate (%):	62%
Ownership/Control:	Private, Non-Profit

Staffing:

Total number of physicians:	112
Percent of Physicians who are Board Certified Specialists:	96%
Interns and Residents per bed:	0
Number of full-time RNs:	66
Number of part-time RNs:	82
Number of full-time LPNs:	4
Number of part-time LPNs:	3

Specialty Services:

Shock/Trauma or Burn Unit:	No
Combined Intensive Care/Cardiac Care Unit:	Yes
Organ Transplant Service:	No
Hospice Care:	Yes

We were unable to determine HCFA's methodology in calculating registered and licensed practical nurses per bed. It is our understanding HCFA now plans to release the total number of full-time RNs and LPNs in each facility. We have a concern about reporting only the number of full-time RNs and LPNs. Most hospitals have part-time nurses to complement the full-time staff. Part-time nurses work a variety of hours per week (some eight, some sixteen, some thirty-two, etc.) and part-time status is defined differently from hospital to hospital. We therefore believe numbers of RN and LPN staff (full-time or part-time) would be inappropriate and misleading for HCFA to use in describing hospital characteristics, thereby providing comparison data among hospitals.

We thank you for the opportunity to review and respond to this data prior to its publication. Please call if you have questions about our response.

Sincerely,

Patricia S. Kubany
Director of Public Relations

vmc

CHIPPEWA CO WAR MEM HOSP

500 OSBORN BLVD
SAULT STE MARIE, MI 49783

Medicare Hospital Provider Number: 230239

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	744	12	11 - 16	763	13	10 - 16
Cancer	21	48	25 - 67	26	62	26 - 64
Cerebrovascular Accidents	37	22	15 - 42	32	19	18 - 46
Gastrointestinal Catastrophes	7	57	15 - 79	8	50	16 - 77
Infectious Disease	7	0	9 - 56	4	0	6 - 71
Metabolic/Electrolyte Disorders	15	20	8 - 53	7	14	7 - 65
Pulmonary Disease	54	31	16 - 42	61	16	15 - 37
Renal Failure	0	-	-	1	0	3 - 98
Severe Acute Heart Disease	36	47	24 - 57	34	44	21 - 55
Severe Chronic Heart Disease	48	13	14 - 35	44	20	13 - 38
Severe Trauma	2	0	0 - 94	0	-	-
Gastrointestinal Disease	56	4	2 - 15	70	4	0 - 18
Gynecologic Disease	6	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	97	4	1 - 12	92	3	1 - 11
Musculoskeletal/Skin Conditions	90	0	1 - 7	82	2	1 - 11
Neuropsychiatric/Sensory Disease	16	0	0 - 92	26	4	0 - 41
Urologic Disease	27	4	0 - 67	13	8	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	136
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	22
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	72
Licensed Practical Nurses:	28

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CLARE COMMUNITY HOSP

104 WEST SIXTH STREET
CLARE, MI 48617

Medicare Hospital Provider Number: 230180

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	610	16	11 - 18	510	12	9 - 16
Cancer	18	61	28 - 72	5	80	22 - 89
Cerebrovascular Accidents	23	39	11 - 51	20	20	12 - 48
Gastrointestinal Catastrophes	5	40	3 - 78	5	40	4 - 78
Infectious Disease	16	25	13 - 57	9	33	8 - 67
Metabolic/Electrolyte Disorders	5	40	7 - 79	2	0	2 - 88
Pulmonary Disease	68	15	15 - 35	47	15	10 - 34
Renal Failure	7	43	15 - 84	8	38	15 - 82
Severe Acute Heart Disease	30	43	20 - 55	23	48	22 - 61
Severe Chronic Heart Disease	56	38	13 - 40	45	29	10 - 38
Severe Trauma	1	0	0 - 97	1	0	1 - 97
Gastrointestinal Disease	55	7	0 - 25	52	2	0 - 17
Gynecologic Disease	7	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	107	1	2 - 7	80	1	1 - 9
Musculoskeletal/Skin Conditions	25	0	0 - 29	28	0	0 - 33
Neuropsychiatric/Sensory Disease	6	17	0 -100	5	0	0 -100
Urologic Disease	17	0	0 - 98	15	7	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	64
Occupancy Rate (%):	48
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	17
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	52
Licensed Practical Nurses:	44

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CLARE
COMMUNITY
HOSPITAL

A Subsidiary of
MID-MICHIGAN
HEALTH CARE SYSTEMS, INC.

October 24, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Re: Medicare Provider No. 23180

Dear Mrs. Kappert:

Thank you for sending our data package on Medicare mortality rates. We appreciate the opportunity to review and comment on these data before their release to the press.

The Health Care Financing Administrator's (HCFA's) efforts to address quality issues are to be applauded. The compilation and dissemination of comparative data may be a reasonable preliminary step in this process provided that the limitations of these data be explained before public release. We believe the most significant of these limitations to be the absence of a severity-of-illness measure in the variables measured.

To those who attempt to interpret these data, we wish to add these observations:

-the average age of the patients in the data was almost 78 years old.

-among the patients in this survey who died in our hospital, 67% were admitted with "DNR" orders.

In light of these observations, the need for a severity-of-illness measure becomes more obvious, if the data are to be interpreted meaningfully. We encourage any interested person to contact his or her doctor or a representative of the hospital.

We regularly review mortalities as part of our ongoing quality assurance program and we appreciate your sharing these data with us. We will continue to be vigilant in

examining all aspects of patient care with the goal of improving our performance.

Sincerely,

Lawrence F Barco

Lawrence F. Barco
President

LFB/s

CLINTON MEM HOSP

805 S OAKLAND
SAINT JOHNS, MI 48879

Medicare Hospital Provider Number: 230103

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	294	10	8 - 16	382	11	8 - 16
Cancer	8	88	25 - 77	10	50	14 - 71
Cerebrovascular Accidents	10	20	9 - 60	16	25	11 - 54
Gastrointestinal Catastrophes	1	0	2 - 97	3	67	6 - 87
Infectious Disease	3	67	13 - 95	2	50	1 - 92
Metabolic/Electrolyte Disorders	2	0	0 - 97	6	33	6 - 74
Pulmonary Disease	22	14	10 - 42	26	19	11 - 44
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	12	42	22 - 73	10	30	12 - 65
Severe Chronic Heart Disease	17	24	10 - 51	26	27	12 - 47
Severe Trauma	0	-	-	2	50	2 - 92
Gastrointestinal Disease	41	0	0 - 20	55	4	0 - 19
Gynecologic Disease	5	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	34	3	0 - 26	54	2	1 - 14
Musculoskeletal/Skin Conditions	28	4	0 - 51	27	4	0 - 31
Neuropsychiatric/Sensory Disease	6	0	0 -100	8	13	0 -100
Urologic Disease	15	0	0 -100	14	0	0 - 76

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	48
Occupancy Rate (%):	44
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	32
Percent of Physicians Who Are Board Certified Specialists:	41
Interns and Residents:	0
Registered Nurses:	35
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COMMUNITY HEALTH CENTER

274 E CHICAGO ST
COLDWATER, MI 49036

Medicare Hospital Provider Number: 230022

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	948	12	10 - 15	961	13	10 - 15
Cancer	35	60	29 - 63	28	39	29 - 66
Cerebrovascular Accidents	24	21	14 - 47	21	33	11 - 51
Gastrointestinal Catastrophes	9	22	13 - 68	4	0	9 - 73
Infectious Disease	22	18	15 - 51	16	31	14 - 60
Metabolic/Electrolyte Disorders	23	13	6 - 42	19	5	5 - 38
Pulmonary Disease	73	22	16 - 37	69	26	15 - 38
Renal Failure	6	50	13 - 85	3	33	9 - 92
Severe Acute Heart Disease	41	37	24 - 54	46	52	26 - 56
Severe Chronic Heart Disease	50	28	11 - 37	48	31	11 - 38
Severe Trauma	1	100	1 - 97	0	-	-
Gastrointestinal Disease	62	5	0 - 22	78	3	1 - 13
Gynecologic Disease	15	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	91	2	1 - 10	113	4	1 - 11
Musculoskeletal/Skin Conditions	122	2	1 - 8	89	1	0 - 9
Neuropsychiatric/Sensory Disease	24	4	0 - 90	11	9	0 -100
Urologic Disease	34	6	0 - 88	36	0	0 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	130
Occupancy Rate (%):	42
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	41
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	75
Licensed Practical Nurses:	29

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COMMUNITY HOSPITAL

MEDICAL PARK DRIVE
WATERVLIET, MI 49098

Medicare Hospital Provider Number: 230078

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	486	10	9 - 15	511	9	8 - 15
Cancer	10	60	13 - 69	14	71	25 - 71
Cerebrovascular Accidents	13	23	10 - 56	8	50	8 - 69
Gastrointestinal Catastrophes	3	33	1 - 88	3	0	5 - 79
Infectious Disease	4	50	14 - 89	3	0	8 - 81
Metabolic/Electrolyte Disorders	9	33	4 - 65	13	0	5 - 39
Pulmonary Disease	43	14	14 - 38	33	9	9 - 34
Renal Failure	3	67	4 - 87	2	100	11 - 96
Severe Acute Heart Disease	18	28	22 - 63	16	38	24 - 69
Severe Chronic Heart Disease	36	25	10 - 40	39	10	16 - 37
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	41	5	0 - 29	57	0	1 - 10
Gynecologic Disease	6	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	76	1	2 - 10	83	1	2 - 9
Musculoskeletal/Skin Conditions	33	0	0 - 21	42	5	0 - 50
Neuropsychiatric/Sensory Disease	6	0	0 - 98	10	0	0 - 98
Urologic Disease	20	0	0 - 74	22	0	0 - 31

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	70
Occupancy Rate (%):	46
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	46
Percent of Physicians Who Are Board Certified Specialists:	74
Interns and Residents:	0
Registered Nurses:	31
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Community Hospital
Watervliet, Michigan

Provider Number: 23-0078

The hospital's comments consisted primarily of annotations to the patient specific information and/or the hospital characteristics generated by the Health Care Financing Administration and provided to the hospital. We did not publish this annotated information.

COMMUNITY HOSPITAL FOUNDATION

80650 N VAN DYKE
ALMONT, MI 48003

Medicare Hospital Provider Number: 230225

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	40	7	2 - 24	84	13	3 - 20
Cancer	1	100	0 - 98	0	-	-
Cerebrovascular Accidents	0	-	-	1	0	0 - 99
Gastrointestinal Catastrophes	0	-	-	1	0	1 - 97
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	1	0	0 -100
Pulmonary Disease	2	0	1 - 91	4	50	8 - 84
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	1	0	0 - 97	5	60	8 - 79
Severe Chronic Heart Disease	1	0	0 - 98	1	0	0 - 99
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	3	0	0 -100	19	5	0 - 98
Gynecologic Disease	2	0	0 -100	0	-	-
Low-Risk Heart Disease	2	50	0 -100	8	13	0 - 95
Musculoskeletal/Skin Conditions	1	0	0 -100	6	0	0 -100
Neuropsychiatric/Sensory Disease	0	-	-	0	-	-
Urologic Disease	7	0	0 -100	4	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	48
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	6
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COMMUNITY MEMORIAL HOSPITAL

748 S MAIN
CHEBOYGAN, MI 49721

Medicare Hospital Provider Number: 230034

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	695	10	9 - 15	636	11	10 - 16
Cancer	9	44	18 - 76	8	63	15 - 75
Cerebrovascular Accidents	26	46	13 - 51	27	15	19 - 47
Gastrointestinal Catastrophes	2	0	4 - 89	5	0	11 - 68
Infectious Disease	12	17	10 - 56	7	29	12 - 74
Metabolic/Electrolyte Disorders	12	25	8 - 59	10	30	7 - 63
Pulmonary Disease	61	23	17 - 41	48	27	15 - 43
Renal Failure	4	75	7 - 84	3	67	11 - 94
Severe Acute Heart Disease	20	35	23 - 64	33	36	23 - 56
Severe Chronic Heart Disease	44	18	10 - 35	52	17	14 - 36
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	61	3	1 - 16	65	0	1 - 9
Gynecologic Disease	8	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	94	2	1 - 10	81	2	1 - 11
Musculoskeletal/Skin Conditions	65	0	0 - 9	39	3	0 - 27
Neuropsychiatric/Sensory Disease	14	7	0 - 94	17	12	0 - 99
Urologic Disease	45	0	0 - 18	42	0	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	129
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	24
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	0
Registered Nurses:	47
Licensed Practical Nurses:	15

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

community memorial hospital
748 south main st. / p.o. box 419 / cheboygan, michigan 49721 / [616] 627-5601

October 20, 1988

Mrs. Sandra Kappert
Health Standards & Quality Bureau
Health Care Financing Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

We have reviewed the information sent to us regarding mortality rates by HCFA, as well as the data received from the Michigan Hospital Association. In reviewing the data, we paid particular attention to the mortality rates in the bottom quartile for our facility (CE and ME) and several categories which were not ranked due to an insufficient number of cases, but had a high mortality percentage. Our findings were as follows:

CE - Of 26 patients, 12 died within 30 days of the last admission
11 patients were over the age of 80 years
4 patients were 90 years old or older
27% were in the 80-84 year age bracket, compared to 21% in the State
45% were over the age of 84 compared to only 22% for the State (double)

ME - Of 12 patients, 3 died within 30 days of last admission
5 patients were over the age of 80 years
5 patients were over the age of 90 years
67% of the patients were more than 84 years old, compared to only 29% Statewide (more than double)

Of those cases not ranked, but which we expect the media may question, we found:

CA - Of 9 patients, 4 died with 30 days of the last admission
5 patients were 80 years old or older
78% of these patients had comorbid conditions compared to a State rate of 67%
44% were 80-84 years old compared to only 14% Statewide
11% were over the age of 84 compared to only 8% Statewide
1 patient was a hospice patient

RN - Of 4 patients, 3 died within 80 days
2 patients were over the age 80 years
100% had comorbid conditions, compared to 65% Statewide
50% were 80-84 years old compared to 15% Statewide

We realize these statistics are valuable, but misleading. In our case, particularly, the ages of the those patients who have died within 30 days of the last admission play a very important role--considering the fact that we have a long-term care unit attached to our facility, and a nursing home in our back yard.

We do appreciate the compiling of data, and hope that it continues and becomes even more useful. We also appreciate the effort to remind everyone who receives the information that it is not to be used as a measure of quality.

Thank you.

Respectfully,

COMMUNITY MEMORIAL HOSPITAL

H Purcell

Howard J. Purcell, President

HJP/jw/bt

COTTAGE HOSPITAL

159 KERCHEVAL AVENUE
GROSSE POINTE, MI 48236

Medicare Hospital Provider Number: 230135

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,218	18	12 - 18	1,172	16	12 - 17
Cancer	64	56	27 - 54	73	64	31 - 56
Cerebrovascular Accidents	47	28	17 - 43	63	29	20 - 44
Gastrointestinal Catastrophes	16	50	17 - 65	9	22	11 - 66
Infectious Disease	22	23	19 - 57	14	36	16 - 66
Metabolic/Electrolyte Disorders	33	55	14 - 51	23	9	6 - 38
Pulmonary Disease	59	25	17 - 41	51	35	15 - 43
Renal Failure	12	33	16 - 76	3	0	13 - 89
Severe Acute Heart Disease	56	50	29 - 56	39	26	24 - 53
Severe Chronic Heart Disease	65	32	15 - 39	64	28	15 - 38
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	87	6	1 - 14	113	3	1 - 10
Gynecologic Disease	11	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	138	4	1 - 10	130	6	1 - 12
Musculoskeletal/Skin Conditions	93	3	1 - 12	81	2	2 - 11
Neuropsychiatric/Sensory Disease	41	5	0 - 29	41	5	0 - 28
Urologic Disease	45	2	0 - 37	35	0	0 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	181
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	159
Percent of Physicians Who Are Board Certified Specialists:	82
Interns and Residents:	0
Registered Nurses:	105
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COTTAGE HOSPITAL
OF GROSSE POINTE
AFFILIATED WITH HENRY FORD HEALTH CARE CORPORATION

159 Kercheval Avenue
Grosse Pointe Farms, Michigan 48236-3692
(313) 884-8600

COTTAGE HOSPITAL OF GROSSE POINTE
HOSPITAL PROVIDER NUMBER 23-0135 HOSPICE PROVIDER NUMBER 23-1517
MEDICARE HOSPITAL MORTALITY INFORMATION

Comments on Selected Aspects of Cottage Hospital Mortality Data

HOSPITAL CHARACTERISTICS
(Hospice)

Cottage Hospital services include the only hospital based, state licensed and Medicare certified hospice program in southeastern Michigan. The Cottage Hospice was certified by Medicare in 1986 for both inpatient and outpatient hospice care. Patients are referred into the Cottage Hospice typically when death is anticipated within six months. The Cottage Hospice operates well within federal hospice certification requirements which state that no less than 80% of the total care provided be on an outpatient basis and no more than 20% of the total care provided be on an inpatient basis. The frequency of inpatient care increases at the terminal stage of the illness and relatively short stay inpatient admissions are experienced by hospice patients immediately preceding their death, and these patients are included in the hospital's overall mortality data.

Cottage Hospital is the only hospital in its service area to reflect purely hospice related admissions in its total mortality data set. For this reason, mortality data for Cottage Hospital is not easily comparable to other hospital data especially in the diagnostic categories which include Cancer and Metabolic or Electrolyte Disturbances.

(Nursing Home Affiliation)

Cottage Hospital is affiliated through common corporate ownership with two nursing homes. Both nursing homes are located within its primary service area. The total bed capacity of the nursing homes is 325. Cottage Hospital is the primary hospital referral resource for both nursing homes.

This affiliation significantly impacts Cottage Hospital's patient mix and it should be noted that 54% of the hospital's inpatient days result from admissions of patients 65 years of age and older. Specific hospital mortality data with respect to many diagnostic categories reflect an elderly population. The average age of deceased patients and former patients for specific diagnostic categories which are listed under the Medicare Hospital Mortality Information demonstrates the influence of the nursing home affiliations as follows:

Diagnostic Category	Average Age of Decedent
Cancer	74.6
Metabolic/Electrolyte Disturbances	80.3
Severe Chronic Heart Disease	81.8
Severe Acute Heart Disease	80.6

DIAGNOSTIC CATEGORY SPECIFIC COMMENTS
(Cancer)

Cottage Hospital's 36 deaths (32 deaths in hospital and 4 deaths after discharge/return to nursing home) documented in the Cancer diagnostic category included 17 patients already admitted to the Hospice or deemed terminal upon admission. Twenty-two of the documented patients were admitted by an oncologist. With the exception of two longer stay cases, the average length of stay for these last admissions to Cottage Hospital was 2.2 days. This short stay is indicative of the terminal stage of illness upon admission and again is a reflection of the Hospice program influence upon referrals to Cottage Hospital.

(Metabolic/Electrolyte Disturbances)

Cottage Hospital's 18 deaths documented in this diagnostic category included 3 hospice patients and 1 hospice candidate. One patient was admitted as a transfer from a Florida hospital because of the availability of the hospice program, however, did not survive long enough to enter the program. Two of the decedents were discharged to return to a nursing home.

This diagnostic category reflects only the primary symptom or reason for admission and not necessarily the most serious or significant underlying disease. All patients documented in this category had secondary diagnoses of cancer, congestive heart failure, septicemia and other life threatening conditions.

CRITTENTON HOSP

1101 W UNIVERSITY DRIVE
ROCHESTER, MI 48063

Medicare Hospital Provider Number: 230254

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,813	11	9 - 14	1,848	12	9 - 14
Cancer	76	43	30 - 56	71	54	32 - 59
Cerebrovascular Accidents	75	24	18 - 39	66	20	19 - 40
Gastrointestinal Catastrophes	7	43	5 - 72	13	38	11 - 63
Infectious Disease	8	25	10 - 68	18	28	15 - 58
Metabolic/Electrolyte Disorders	25	16	9 - 44	29	21	8 - 43
Pulmonary Disease	67	33	15 - 40	74	24	16 - 38
Renal Failure	5	20	16 - 87	5	40	17 - 91
Severe Acute Heart Disease	61	34	25 - 51	90	38	28 - 50
Severe Chronic Heart Disease	114	25	13 - 31	101	25	15 - 33
Severe Trauma	3	33	6 - 87	4	0	5 - 72
Gastrointestinal Disease	155	1	2 - 7	166	1	1 - 6
Gynecologic Disease	15	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	319	3	2 - 6	353	3	1 - 6
Musculoskeletal/Skin Conditions	142	3	1 - 9	135	3	0 - 10
Neuropsychiatric/Sensory Disease	43	0	0 - 17	43	2	0 - 26
Urologic Disease	98	0	0 - 7	88	1	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	261
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	159
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	0
Registered Nurses:	254
Licensed Practical Nurses:	93

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

CRITTENTON

Hospital ID: 230254

October 14, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert,

We appreciate the opportunity to review the selected mortality data for Medicare patients treated at Crittenton Hospital in 1987.

We have no comments for publication with our data.

Attached is a list of patient-specific information where we found errors in the data. As instructed, this information is being submitted separately to you for your office to follow-up as necessary.

Sincerely,

Richard J. Zunker
President

CRYSTAL FALLS COMM HOSP

MICHIGAN AND 3RD ST
CRYSTAL FALLS, MI 49920

Medicare Hospital Provider Number: 230194

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	232	9	9 - 18	199	16	8 - 19
Cancer	6	67	16 - 81	9	33	12 - 69
Cerebrovascular Accidents	10	0	17 - 51	12	25	9 - 58
Gastrointestinal Catastrophes	4	50	6 - 83	3	0	5 - 79
Infectious Disease	2	0	2 - 88	1	100	3 - 99
Metabolic/Electrolyte Disorders	3	0	1 - 84	3	0	3 - 79
Pulmonary Disease	14	29	9 - 56	17	29	5 - 51
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	11	45	14 - 68	8	50	11 - 72
Severe Chronic Heart Disease	27	4	13 - 33	8	25	6 - 65
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	27	4	0 - 32	17	0	0 - 76
Gynecologic Disease	2	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	32	0	0 - 24	28	14	0 - 67
Musculoskeletal/Skin Conditions	15	0	0 - 94	11	0	0 - 99
Neuropsychiatric/Sensory Disease	9	0	0 - 93	2	0	0 -100
Urologic Disease	6	0	0 -100	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	35
Occupancy Rate (%):	31
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	5
Percent of Physicians Who Are Board Certified Specialists:	40
Interns and Residents:	0
Registered Nurses:	14
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

DECKERVILLE COMMUNITY HOSP

3559 PINE ST
DECKERVILLE, MI 48427

Medicare Hospital Provider Number: 230154

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	117	12	10 - 22	127	19	11 - 25
Cancer	4	50	12 - 88	1	100	2 - 97
Cerebrovascular Accidents	5	40	4 - 77	7	29	10 - 72
Gastrointestinal Catastrophes	0	-	-	1	100	2 - 98
Infectious Disease	3	33	5 - 86	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	20	10	17 - 48	19	32	15 - 56
Renal Failure	1	0	3 - 99	1	100	1 - 97
Severe Acute Heart Disease	3	33	5 - 87	10	50	12 - 68
Severe Chronic Heart Disease	8	13	3 - 60	16	25	10 - 53
Severe Trauma	1	0	2 - 97	0	-	-
Gastrointestinal Disease	9	0	0 - 86	10	0	0 - 72
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	7	0	0 -100	14	0	0 - 65
Musculoskeletal/Skin Conditions	6	0	0 - 99	8	0	0 -100
Neuropsychiatric/Sensory Disease	4	0	0 -100	1	0	0 -100
Urologic Disease	1	0	0 -100	5	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	25
Occupancy Rate (%):	28
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	4
Percent of Physicians Who Are Board Certified Specialists:	25
Interns and Residents:	0
Registered Nurses:	11
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

DETROIT OSTEO HOSP

12523 3RD AVE
HIGHLAND PARK, MI 48203

Medicare Hospital Provider Number: 230150

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	896	15	10 - 16	859	13	10 - 16
Cancer	47	55	32 - 63	55	31	32 - 59
Cerebrovascular Accidents	19	32	10 - 51	24	25	16 - 51
Gastrointestinal Catastrophes	3	33	5 - 87	6	50	8 - 76
Infectious Disease	14	36	14 - 63	7	29	17 - 78
Metabolic/Electrolyte Disorders	26	31	11 - 50	12	25	12 - 62
Pulmonary Disease	42	31	14 - 44	22	36	7 - 49
Renal Failure	29	31	15 - 65	17	35	10 - 67
Severe Acute Heart Disease	20	55	20 - 62	21	33	20 - 60
Severe Chronic Heart Disease	37	16	12 - 37	55	11	11 - 30
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	38	5	0 - 30	39	5	0 - 28
Gynecologic Disease	3	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	174	7	1 - 11	169	6	1 - 10
Musculoskeletal/Skin Conditions	64	0	0 - 11	59	3	0 - 20
Neuropsychiatric/Sensory Disease	40	0	0 - 22	20	0	0 - 41
Urologic Disease	33	3	0 - 38	24	4	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	169
Occupancy Rate (%):	74
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	130
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	26
Registered Nurses:	118
Licensed Practical Nurses:	41

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

STATEMENT PREPARED BY

DETROIT OSTEOPATHIC HOSPITAL

REGARDING HCFA MORTALITY DATA

Detroit Osteopathic Hospital is a 300 bed, acute-care, inner-city hospital. It houses several specialty programs, such as the Detroit Heart Institute, Radiation Oncology Services, and a regional Artificial Kidney Center.

As a result of being the primary referral center for the osteopathic hospitals in the Detroit area, patients in the end stage and most acute phases of illness are transferred here for the specialty services we offer. The statistics for these specialties, consequently, tend to be on the high end in mortality reports, although no category in this report exceeded the predicted mortality range.

Although improvement is noted over last year, HCFA'S statistical models, although revised this year, are still creating artificially arranged groups of patients based on data still in need of further refinement. For instance, by not considering surgical procedures in the HCFA models, the Low Risk Heart group contains the open heart surgery cases done at D.O.H. Open heart surgery is a high-risk procedure. It is also noted that 69% of this group was transferred from other acute care hospitals for heart surgery.

Other groups not considered by the HCFA model are those patients arriving as emergency admissions in a state so near death that they died within twenty-four (24) hours of admission, or those with "do not resuscitate" orders on their charts. Our statistics indicate that 25% of our deaths were either moribund at the time of admission or contained orders limiting life-saving measures in the presence of irreversible end stage illness.

The Renal population in the HCFA study again shows a consistent 66% transfer-in rate from other acute hospitals to D.O.H. for hemodialysis and other renal specialty services. Severe kidney failure carries a high risk of mortality.

In addition, our Pulmonary mortality category contains 70% nursing home patients admitted with pneumonia or other pulmonary diagnosis, including cancer as a co-morbid condition.

The eighteen (18) patients who died outside the hospital appeared to have succumbed to their diseases. This group contained a high number of patients who elected to go home or to a hospice during their last days of life, refusing further palliative hospital treatment.

The Cancer group contains a population of D.O.H. patients whose average age is seventy-four (74) years old, all in the advanced stage of their disease, with co-morbidity rates higher than the state average. Twenty-six percent of these patients had "do not resuscitate" orders on their charts.

The HCFA model produced some categories with seemingly high mortality rates, but containing so few cases that one or two deaths produced a misleading mortality rate. It is generally agreed that the smaller the number of cases in a group the less reliable or representative the percentages are for that group. Four groups contained fewer than twenty (20) patients for D.O.H. (two groups had only three (3) cases). Other statistics were not only misleading, but inaccurate. One of our heart "deaths" was discovered to be alive and well, as reported by his doctor. He did not die, as reported, within thirty days of admission to our hospital.

It is important to remember that the HCFA study is based on a sub-group of Medicare admissions which results in a denominator considerably smaller than the total number of Medicare admissions, and includes patients who died after being discharged from the hospital of causes not necessarily related to their hospital admission.

The model remains, according to the Federal Register, simply one of many potential indicators of quality among hospitals. These statistics will vary each year depending on the variables considered. The ability to accurately predict risk of death based on the present HCFA characteristics is not yet demonstrated.

Detroit Osteopathic Hospital has a Quality Assessment Program which includes review of all care given to all patients who die during their hospital stay. This review is conducted by a committee of physicians who represent all areas of specialty in the hospital. The information contained in the HCFA reports is used to supplement the mortality review function of this physician committee.

/js
10/19/88

DETROIT REC HOSP UNIV HLTH CTR

4201 ST ANTOINE
DETROIT, MI 48201

Medicare Hospital Provider Number: 230273

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,324	18	10 - 16	1,298	19	10 - 16
Cancer	28	57	22 - 60	15	33	18 - 65
Cerebrovascular Accidents	84	32	16 - 38	97	35	16 - 37
Gastrointestinal Catastrophes	23	57	19 - 61	18	67	20 - 64
Infectious Disease	21	43	14 - 57	22	68	17 - 57
Metabolic/Electrolyte Disorders	36	36	10 - 46	31	23	7 - 42
Pulmonary Disease	62	27	14 - 38	54	31	13 - 40
Renal Failure	11	45	10 - 72	11	27	17 - 77
Severe Acute Heart Disease	58	48	25 - 52	51	45	29 - 57
Severe Chronic Heart Disease	85	27	14 - 34	87	22	14 - 33
Severe Trauma	16	31	11 - 59	15	47	9 - 61
Gastrointestinal Disease	29	0	1 - 20	33	12	0 - 67
Gynecologic Disease	4	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	130	4	1 - 10	132	8	1 - 13
Musculoskeletal/Skin Conditions	146	3	1 - 9	128	2	0 - 11
Neuropsychiatric/Sensory Disease	58	7	0 - 37	40	13	0 - 69
Urologic Disease	16	0	0 - 98	21	0	0 - 89

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1985

Total Beds (#):	305
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	107
Registered Nurses:	414
Licensed Practical Nurses:	79

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

DETROIT RECEIVING HOSPITAL AND
UNIVERSITY HEALTH CENTER
4201 ST. ANTOINE
DETROIT, MICHIGAN 48201

Hospital Medicare I.D.#: 230273

October 18, 1988

HEALTH STANDARDS AND QUALITY BUREAU, HCFA
2D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

ATTENTION: Mrs. Sandra Kappert

Dear Mrs. Kappert:

We appreciate the opportunity to review and respond to the 1987 Medicare mortality data relative to Detroit Receiving Hospital and University Health Center.

Detroit Receiving Hospital and University Health Center is a 340-bed Level I emergency/trauma hospital and a subsidiary of The Detroit Medical Center, located in mid-town Detroit. Over ninety-five percent of our patients are admitted via the Emergency Department. As a specialty hospital, approximately thirty percent of our beds are categorized for intensive care and intensive care step-down of various types. We have a Burn Center, a Spinal Cord Injury Unit, Coronary Care, Surgical Intensive Care, Medical Intensive Care, and Pulmonary Special Care, in addition to a full complement of medical and surgical acute care beds.

Detroit Receiving is, therefore, an institution which provides tertiary care for the most serious illnesses and injuries. The community's emergency medical transport system relies on our availability. Hospitals and nursing homes transfer to us patients whose conditions require care beyond the expertise of community hospitals and long term care facilities.

The 1987 HCFA Medicare mortality data again reinforced what we have always known about our older patients, particularly as it relates to the severity of their illness (which is not adequately addressed by the DRG classification system), their poor underlying health status, and their lack of a social support system.

We reviewed patient records referenced in the HCFA data and found that the mortality data are accurate. By DRG rules, the coding was appropriate as to principal diagnosis, but the cause of death of a significant number of patients differed from the principal DRG diagnosis.

For the sixteen major diagnostic categories, we fell within the "predicted range". Therefore, for purposes of this response, we chose to review all the mortalities in the "All Other Diseases" category. We found the following:

- 68% of the patients required admission directly to the ICU from the Emergency Department;
- 79% of the patients expired due to a massive cardiac and/or respiratory arrest;
- 28% of the patients were admitted to the Emergency Department in cardiac/respiratory arrest;
- 21% of the patients were hopelessly ill (terminal).

These percentages again reinforce the severity of illness of the majority of the patients admitted to our institution.

We will be using these mortality data as an integral part of our on-going quality assurance program, and as a basis for understanding and advocating for the unique requirements of the older population we serve.

Sincerely,

Edward S. Thomas

Edward S. Thomas
President and
Chief Executive Officer

/dh

DETROIT RIVERVIEW HOSPITAL

7733 E JEFFERSON
DETROIT, MI 48214

Medicare Hospital Provider Number: 230119

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	523	8	10 - 15	219	7	8 - 15
Cancer	15	20	21 - 64	7	29	13 - 75
Cerebrovascular Accidents	19	0	16 - 37	9	11	11 - 59
Gastrointestinal Catastrophes	2	100	3 - 88	5	20	3 - 75
Infectious Disease	2	50	7 - 95	4	25	9 - 82
Metabolic/Electrolyte Disorders	20	20	10 - 50	6	17	2 - 70
Pulmonary Disease	25	16	13 - 45	5	20	3 - 74
Renal Failure	7	14	16 - 79	5	60	12 - 87
Severe Acute Heart Disease	19	37	21 - 63	9	22	19 - 72
Severe Chronic Heart Disease	28	21	9 - 41	6	33	3 - 73
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	34	3	1 - 24	14	0	0 - 94
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	76	0	1 - 7	36	0	0 - 22
Musculoskeletal/Skin Conditions	26	8	0 - 72	2	0	0 -100
Neuropsychiatric/Sensory Disease	55	0	0 - 12	33	0	0 - 59
Urologic Disease	25	0	0 - 37	13	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	260
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	14
Registered Nurses:	130
Licensed Practical Nurses:	41

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

DICKINSON COUNTY MEMORIAL HOSPITAL

400 WOODWARD AVENUE
IRON MOUNTAIN, MI 49801

Medicare Hospital Provider Number: 230055

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,022	9	9 - 14	1,055	9	8 - 13
Cancer	32	41	25 - 61	20	45	24 - 67
Cerebrovascular Accidents	36	31	13 - 44	22	23	10 - 46
Gastrointestinal Catastrophes	6	50	11 - 79	8	38	13 - 73
Infectious Disease	10	20	13 - 64	6	33	8 - 75
Metabolic/Electrolyte Disorders	18	17	8 - 48	12	25	5 - 57
Pulmonary Disease	48	17	15 - 39	56	20	15 - 38
Renal Failure	1	0	3 - 98	4	50	6 - 85
Severe Acute Heart Disease	47	36	25 - 54	38	32	23 - 53
Severe Chronic Heart Disease	50	14	13 - 35	47	17	12 - 36
Severe Trauma	0	-	-	2	0	1 - 90
Gastrointestinal Disease	72	1	1 - 11	106	3	1 - 10
Gynecologic Disease	7	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	115	2	2 - 8	136	7	1 - 12
Musculoskeletal/Skin Conditions	107	1	1 - 7	98	1	1 - 8
Neuropsychiatric/Sensory Disease	54	0	0 - 12	33	3	0 - 71
Urologic Disease	40	0	0 - 20	50	0	0 - 28

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	108
Occupancy Rate (%):	57
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	39
Percent of Physicians Who Are Board Certified Specialists:	82
Interns and Residents:	0
Registered Nurses:	48
Licensed Practical Nurses:	36

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

DOCTORS HOSPITAL

2730 E JEFFERSON AVE
DETROIT, MI 48207

Medicare Hospital Provider Number: 230090

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	355	32	14 - 25	409	26	12 - 21
Cancer	8	50	10 - 72	7	57	15 - 78
Cerebrovascular Accidents	14	29	10 - 57	16	44	10 - 57
Gastrointestinal Catastrophes	2	50	3 - 92	7	29	6 - 70
Infectious Disease	28	57	23 - 61	13	69	12 - 62
Metabolic/Electrolyte Disorders	8	38	6 - 69	26	38	13 - 53
Pulmonary Disease	46	54	20 - 50	40	52	15 - 47
Renal Failure	7	86	7 - 71	2	0	0 - 97
Severe Acute Heart Disease	5	40	16 - 86	11	64	21 - 74
Severe Chronic Heart Disease	24	42	14 - 53	18	44	11 - 55
Severe Trauma	4	25	4 - 80	2	50	2 - 92
Gastrointestinal Disease	8	0	0 - 99	16	0	1 - 34
Gynecologic Disease	2	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	18	17	0 - 88	24	17	0 - 80
Musculoskeletal/Skin Conditions	13	0	0 - 84	23	9	0 - 99
Neuropsychiatric/Sensory Disease	14	0	0 -100	20	0	0 - 96
Urologic Disease	5	20	0 -100	7	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	101
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	58
Percent of Physicians Who Are Board Certified Specialists:	55
Interns and Residents:	8
Registered Nurses:	18
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Doctors Hospital

2730 East Jefferson Avenue • Detroit, Michigan 48207

Telephone (313) 259-3050

COMMENTS ON HCFA'S MORTALITY STUDY

Medicare Provider Number: 230090

We applaud the Health Care Financing Administration's (HCFA's) refinement of the analytic methodologies and data validation techniques applied in their study of 1987 Medicare mortality information. However, after our own careful review, we still find a number of limitations to the improved methodologies and appreciate the opportunity to comment.

To put HCFA's mortality data into accurate and meaningful context, the following factors must be considered:

1) It has been difficult to correlate and reconcile both the 1986 and 1987 HCFA data with our own data and the Professional Activity Study (PAS) data. HCFA's study for both years understates the total Medicare discharges, thereby artificially inflating Doctors Hospital's mortality percentages.

2) Additionally, the inclusion of all deaths that occur within 30 days of discharge skews the overall percentages. According to HCFA's 1987 statistical model, nearly 22% of all deaths attributable to Doctors Hospital fall into this category.

3) 93% of Doctors Hospital's Medicare patients are transferred to our facility from inner-city nursing homes and the HCFA study makes no allowance for the special characteristics of the nursing home patient - i.e., advanced age, severity of illness and socio-economic factors that adversely affect health. Please note: **there is nothing built into the HCFA model that allows them to trace the number of Medicare admissions to an acute care facility from an extended care facility.**

To elaborate on the last, nursing home transfer patients are already so ill that they require around-the-clock care and their illnesses are complicated by their life-long, impoverished inner-city lifestyle. In short, these patients have been physically weakened more than those in other circumstances by a lifetime of wants: the lack of good, well-rounded prior medical care, good nutrition and exercise. The deteriorated condition of our Medicare patients is also indicated by an average length of stay 30% higher than the state average: 11.4 days as opposed to the 8.75 day state average. Our concern for our patients' well-being transcends DRG length-of-stay mandates to the point of sacrificing reimbursement

for quality of care.

Advanced age also plays a part in severity of illness - the older the patient is, the more frail and susceptible to complications. Because of Doctors Hospital's specialized program for the elderly, the average age of patients is much greater than the norm. According to a 1986 report published by the Greater Detroit Area Health Council, Doctors Hospital treats as many as 250% more patients who are age 75 and older than all other Southeast Michigan hospitals combined.

The fact that Doctors Hospital's patients are severely ill is unquestionably demonstrated by the following figures. In 1987, our Medicare case index increased 16% from 1.2 in 1986 to 1.43. The average of all hospitals in the United States is equivalent to 1.0, indicating that the acuity level at Doctors Hospital is 43% higher than average for the United States.

For further comparisons of the 115 attributable deaths in the 1987 HCFA study, also note that:

* the average age of all Medicare deaths was 79.

* 60, or 52%, of the expirations were patients older than age 81.

* 101, or 88%, of the Medicare deaths were patients with 2 or more comorbid conditions and/or complications, excluding age.

* 30, or 26%, of the Medicare deaths occurred within 48 hours of admission, indicating their extremely deteriorated condition upon arrival. The principal diagnoses for those patients were high risk.

In conclusion, we wish to offer our assurance that Doctors Hospital makes every effort to monitor our quality of care, as evidenced by our own quality assurance activities, which include reviews of mortalities. In addition, our quality of care and mortality rates are regularly reviewed by MPRO, the Michigan Department of Health and the Joint Commission on Accreditation of Health Care Organizations.

Doctors Hospital has always and will continue to provide a quality of care that cannot be judged solely from HCFA's isolated mortality data. The bulk of our hospital patient load is the very ill, impoverished elderly patient who comes to us in desperate need of care. For that reason, on the surface, our mortality rate may appear a little higher than normal. The way to lower our mortality rate would be to change our patient mix and not accept the high risk cases; however, we feel a responsibility to the people of our community to maintain not only a quality facility, but a reliable one willing to receive the very sick and elderly. In this light, we trust the public look at the patients and conditions behind HCFA's numbers.

DOCTORS HOSPITAL OF JACKSON

110 N ELM AVENUE
JACKSON, MI 49202

Medicare Hospital Provider Number: 230184

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	327	6	7 - 13	421	7	7 - 13
Cancer	4	75	16 - 89	5	20	5 - 74
Cerebrovascular Accidents	7	0	7 - 53	7	43	7 - 72
Gastrointestinal Catastrophes	5	0	7 - 65	4	0	7 - 72
Infectious Disease	2	0	0 - 95	6	33	16 - 82
Metabolic/Electrolyte Disorders	12	17	6 - 54	12	17	3 - 54
Pulmonary Disease	8	0	8 - 50	27	7	10 - 35
Renal Failure	2	100	11 - 98	0	-	-
Severe Acute Heart Disease	8	50	18 - 78	17	29	18 - 60
Severe Chronic Heart Disease	21	19	9 - 45	22	0	15 - 33
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	32	3	0 - 47	40	5	0 - 38
Gynecologic Disease	7	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	44	2	0 - 19	45	0	1 - 12
Musculoskeletal/Skin Conditions	19	5	1 - 37	25	0	0 - 43
Neuropsychiatric/Sensory Disease	8	0	1 - 52	12	17	0 -100
Urologic Disease	41	0	0 - 25	29	3	0 - 69

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	75
Occupancy Rate (%):	35
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	32
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	0
Registered Nurses:	30
Licensed Practical Nurses:	24

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

DOCTORS
HOSPITAL
OF JACKSON

110 North Elm Avenue • Jackson, Michigan 49202 • (517) 787-1440

October 17, 1988

HOSPITAL IDENTIFICATION NO 230184

To Whom It May Concern:

Thank you for your recent mortality information. We appreciate having the opportunity to review and comment on this information prior to the December 1988 release date. This information assists us in our efforts to continually enhance our quality assurance program.

Your data takes into account those patients that expired 30 days after discharge from our hospital. Specific hospital characteristics reflect the medical surgical unit exclusively and does not take into account total bed utilization such as: Intensive Care/Coronary Care and Pediatrics. In addition, the hospital characteristics submitted to Doctors Hospital of Jackson was inaccurate in the fact that we have 46% of our physicians board certified. We would also like to bring to your attention that HCFA's data fails to report those calculations used by HCFA to establish their data.

We were within the range of the predicted mortality rates on all categories except the diagnostic category Renal Failure. In this category, the average age of those two cases that expired at Doctors Hospital was 93. In addition, these patients had multiple co-morbidities.

In summary, quality of care is not indicated exclusively by the mortality rate of a hospital. We at Doctors Hospital of Jackson pride ourselves on personalized patient care. We are constantly upgrading our Quality Assurance Program to reinforce, support and provide the best possible patient care.

Sincerely,

Dennis L. Knapp
Chief Executive Officer

EATON RAPIDS COMMUNITY HOSPITAL

1500 SOUTH MAIN STREET
EATON RAPIDS, MI 48827

Medicare Hospital Provider Number: 230153

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	225	11	8 - 17	265	12	10 - 18
Cancer	5	40	12 - 83	5	60	12 - 83
Cerebrovascular Accidents	7	14	5 - 63	10	0	8 - 43
Gastrointestinal Catastrophes	2	0	1 - 89	2	50	3 - 92
Infectious Disease	1	0	3 - 98	5	20	15 - 82
Metabolic/Electrolyte Disorders	0	-	-	4	50	2 - 83
Pulmonary Disease	15	13	8 - 47	23	17	15 - 49
Renal Failure	0	-	-	2	100	10 - 95
Severe Acute Heart Disease	11	82	22 - 69	13	46	16 - 66
Severe Chronic Heart Disease	11	36	5 - 60	17	12	7 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	29	7	0 - 51	28	7	0 - 58
Gynecologic Disease	1	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	41	5	1 - 23	34	0	1 - 16
Musculoskeletal/Skin Conditions	16	0	2 - 28	12	0	0 - 65
Neuropsychiatric/Sensory Disease	5	0	0 - 86	3	33	0 - 92
Urologic Disease	7	0	0 - 97	9	0	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	41
Occupancy Rate (%):	32
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	16
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	0
Registered Nurses:	43
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

EATON RAPIDS COMMUNITY HOSPITAL

1500 South Main Eaton Rapids, Michigan 48827 (517)663-2671

October 20, 1988 Medicare Provider #230153

Health Standards and Quality Bureau, HCFA
William L. Roper, M.D.
c/o Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

With reference to HCFA's Medicare Mortality Predictor System (MMPS) and the report generated for our hospital, we are herewith offering corrections (see attached) and commenting on the results.

In the sole diagnostic category of severe acute heart disease was our hospital deemed to have differed from the "predicted" mortality rate, which is an average. Within a single diagnostic category, the MMPS has a severely limited ability to predict mortality.

Upon examination of the care provided to the Medicare beneficiaries in the diagnostic category of severe acute heart disease, we believe the difference between the actual and predicted mortality rates is due to the kinds of patients treated and/or chance.

Among the 11 patients treated for this diagnostic category, nine died. Of the nine, their ages ranged from 66 - 95, mean of 77.

Two patients, aged 66 and 67, also suffered from long-standing chronic illnesses; i.e., cancer, diabetes mellitus. One had a history of heart disease and a previous myocardial infarction.

Another of the remaining seven expired on the day of admission of an intra-abdominal aortic aneurysm.

Among the six patients, the average age was 82 years. One patient refused any invasive treatment. The others were afflicted with one or more of the multiple chronic illnesses noted above; i.e. cancer, heart and lung

disease, and diabetes mellitus. These disease entities compromised the condition of the Medicare beneficiaries, meaning death is more inevitable in these high risk patients when they suffer severe myocardial infarctions.

As an average, the predicted mortality rate is affected by chance. One year the rate may be higher, the next lower. That appears to be the case here.

Thank you for the opportunity to comment on the data.

Sincerely Yours,

John M. Avers
President

JMA:mw

File #.008/9

EDWARD W SPARROW HOSPITAL

1215 E MICHIGAN AVENUE
LANSING, MI 48912

Medicare Hospital Provider Number: 230230

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,021	14	10 - 15	2,101	14	11 - 15
Cancer	116	49	30 - 53	124	43	30 - 52
Cerebrovascular Accidents	81	33	16 - 38	100	34	18 - 38
Gastrointestinal Catastrophes	24	25	21 - 59	14	21	15 - 61
Infectious Disease	32	50	19 - 55	33	30	17 - 52
Metabolic/Electrolyte Disorders	30	33	11 - 48	28	18	11 - 45
Pulmonary Disease	85	32	17 - 39	81	15	14 - 33
Renal Failure	16	31	13 - 68	13	15	15 - 71
Severe Acute Heart Disease	54	41	25 - 53	80	45	30 - 53
Severe Chronic Heart Disease	67	25	13 - 35	72	25	15 - 36
Severe Trauma	7	57	8 - 73	5	40	4 - 78
Gastrointestinal Disease	128	4	1 - 10	92	3	1 - 12
Gynecologic Disease	51	0	0 -100	30	0	0 - 99
Low-Risk Heart Disease	186	3	1 - 8	196	3	1 - 7
Musculoskeletal/Skin Conditions	231	2	1 - 6	230	2	1 - 6
Neuropsychiatric/Sensory Disease	49	12	0 - 35	58	3	0 - 25
Urologic Disease	87	0	0 - 8	95	1	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	502
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	59
Registered Nurses:	571
Licensed Practical Nurses:	68

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	Yes

EMMA L BIXBY HOSPITAL

818 RIVERSIDE AVE
ADRIAN, MI 49221

Medicare Hospital Provider Number: 230005

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,042	15	9 - 15	1,048	15	9 - 15
Cancer	26	62	23 - 61	23	48	22 - 63
Cerebrovascular Accidents	37	27	15 - 45	57	40	16 - 42
Gastrointestinal Catastrophes	12	42	14 - 67	8	63	10 - 71
Infectious Disease	20	45	13 - 57	11	45	14 - 69
Metabolic/Electrolyte Disorders	27	37	9 - 49	29	38	8 - 47
Pulmonary Disease	59	29	12 - 37	65	22	14 - 37
Renal Failure	11	45	15 - 77	9	67	12 - 76
Severe Acute Heart Disease	55	29	23 - 48	54	33	23 - 49
Severe Chronic Heart Disease	56	30	13 - 38	48	23	14 - 39
Severe Trauma	2	50	0 - 94	1	0	0 - 99
Gastrointestinal Disease	81	4	0 - 15	80	2	1 - 12
Gynecologic Disease	20	5	0 -100	16	0	0 -100
Low-Risk Heart Disease	103	5	1 - 12	124	7	1 - 14
Musculoskeletal/Skin Conditions	63	3	0 - 23	69	1	1 - 11
Neuropsychiatric/Sensory Disease	33	0	0 - 41	32	0	0 - 47
Urologic Disease	72	1	0 - 17	57	0	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	175
Occupancy Rate (%):	45
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	55
Percent of Physicians Who Are Board Certified Specialists:	60
Interns and Residents:	0
Registered Nurses:	85
Licensed Practical Nurses:	56

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

EMMA L.
BIXBY MEDICAL CENTER

October 18, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

After reviewing the HCFA Mortality Statistics submitted regarding our facility it has come to our attention that the total number of beds in the hospital characteristics portion is incorrect. Emma L. Bixby Hospital ID #230005 has a bed capacity of 195 not 102.

Thank you for your attention in this matter.

Sincerely,

Diana Mason-Brown

Diana Mason-Brown MD
Director of Quality Assurance

DB:ms

FERGUSON HOSPITAL

72 SHELDON BLVD S E
GRAND RAPIDS, MI 49502

Medicare Hospital Provider Number: 230237

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	518	5	4 - 10	487	4	6 - 11
Cancer	14	29	20 - 66	17	29	28 - 72
Cerebrovascular Accidents	1	0	1 - 97	0	-	-
Gastrointestinal Catastrophes	4	25	4 - 80	3	33	7 - 88
Infectious Disease	0	-	-	4	0	10 - 74
Metabolic/Electrolyte Disorders	13	54	8 - 61	8	13	4 - 60
Pulmonary Disease	0	-	-	1	0	0 - 98
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	1	0	0 - 99
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	81	2	0 - 13	71	0	1 - 8
Gynecologic Disease	2	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	69	0	0 - 9	68	0	0 - 11
Musculoskeletal/Skin Conditions	4	0	0 -100	6	0	0 -100
Neuropsychiatric/Sensory Disease	0	-	-	0	-	-
Urologic Disease	55	0	0 - 54	50	0	0 - 44

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	105
Occupancy Rate (%):	39
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	37
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	7
Registered Nurses:	64
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

FLINT OSTEO HOSP

3921 BEECHER RD
FLINT, MI 48502

Medicare Hospital Provider Number: 230197

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,126	13	11 - 16	1,958	13	11 - 15
Cancer	39	44	26 - 59	58	36	27 - 55
Cerebrovascular Accidents	77	34	20 - 42	62	26	20 - 43
Gastrointestinal Catastrophes	14	36	10 - 60	23	39	16 - 58
Infectious Disease	30	50	21 - 59	11	45	17 - 72
Metabolic/Electrolyte Disorders	81	21	16 - 41	66	27	18 - 45
Pulmonary Disease	164	26	19 - 36	135	24	18 - 36
Renal Failure	17	41	17 - 73	18	44	18 - 75
Severe Acute Heart Disease	67	46	30 - 55	76	45	28 - 52
Severe Chronic Heart Disease	135	19	19 - 34	100	24	16 - 34
Severe Trauma	2	0	0 - 94	1	0	0 - 99
Gastrointestinal Disease	113	1	1 - 7	137	3	2 - 9
Gynecologic Disease	31	0	0 -100	26	0	0 -100
Low-Risk Heart Disease	297	2	2 - 6	255	2	2 - 6
Musculoskeletal/Skin Conditions	171	2	1 - 7	161	2	0 - 8
Neuropsychiatric/Sensory Disease	62	0	0 - 12	83	1	1 - 10
Urologic Disease	104	2	0 - 11	89	3	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	359
Occupancy Rate (%):	61
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	132
Percent of Physicians Who Are Board Certified Specialists:	45
Interns and Residents:	58
Registered Nurses:	273
Licensed Practical Nurses:	117

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No



October 20, 1988

William L. Roper, MD
Administrator
Department of Health and Human Services
Health Care Finance Administration
Washington, D.C. 20201

Dear Dr. Roper:

We appreciate the opportunity to review and respond to the 1987 Medicare Hospital Mortality Information. Flint Osteopathic Hospital is a 359 bed non-profit full service community hospital. While all of our mortality data fell within the predicted range and most fell below the fiftieth percentile, we feel that commentary directed towards the report and its methodology is in order. No direct association between quality of care provided and mortality has ever been demonstrated. Outcome measures such as mortality have the disadvantage of not being a pure indicator of performance and may reflect states of technology or other factors beyond the control of the organization. The time frame in which the outcome is measured may be biased towards short versus long term expectations. Limiting structure and process criteria in determining quality of care may restrict the interpretability of the data and confine its usefulness as an assessment tool.

Detailed below are specific comments as they relate to the format and analysis of the data.

1. Of great significance is the fact that severity of illness is not a factor included in HCFA's methodology for deriving predicted mortality. While HCFA's model includes select associated medical conditions, no actual measure of severity of illness, as it relates to the principal condition or associated medical conditions that may contribute to the severity, is included. (1)

2. Comorbidity is limited in number and type by the HCFA methodology. This limitation in conjunction with reporting bias restricts the validity of adjusting hospital death rates by the current method. (1,2)

3. Other factors not considered may have a significant association with mortality for specific patients i.e. pre-admission morbidity status, socio-economic status, and general attitude about health care.

4. Deaths that occur after discharge but within 30 days of the last admission may be misleading as an indicator of quality of care. A certain number of these deaths were anticipated as might occur with patients who are participating in a hospice program. Other deaths that may have occurred in this time frame may be unrelated to the last hospital admission. Fifteen percent of all mortalities at Flint Osteopathic Hospital occured after discharge.

5. The statistical data presented applies only to Medicare patients who are at a greater risk than the general population. Therefore HCFA's predicted mortality rates cannot be applied to the general patient population in a hospital. Data that HCFA utilizes is based on information that is provided for reimbursement. This limits the interpretation in that mortality is related to the principal reason for admission to the hospital and not necessarily related to the principal disease state that causes or is related to death.

The assessment of quality is an imperfect process that has been classically determined by evaluating structure, process and outcome of diagnosis and treatment. Changes in the medical, legal, and ethical framework of health care causes us to continually re-assess the quality as well as the quantity of care provided. Within this framework and in conjunction with the Medicare mortality information, issues regarding appropriateness of care, withholding or withdrawing treatment where there is no hope of any eventful outcome and maintaining the highest levels of overall quality of care within the financial constraints placed on health care providers has to be given weight in this determination process. With this in mind, Flint Osteopathic Hospital has strived to maintain the highest standards of quality assurance through its institutional review committee and state PRO organization. This continuing process along with the assistance from HCFA and the Medicare Mortality Predictor System, will allow us to continually address the issues of quality of care and to maintain as high a standard as possible.

Sincerely,

Matthew J. Weiss, D.O., M.P.H.
Medical Director, Geriatric Services

MJW:jae

1. Jencks SF, Williams D, Kay TL: Assessing hospital-associated deaths from discharge data, the role of length of stay and comorbidities. JAMA 1988;2240-2246.

2. Greenfield S, Aronow HU, Elashoff RM, Watanabe D: Flaws in mortality data, the hazards of ignoring comorbid disease. JAMA 1988;2253-2255.

FRANCIS A BELL MEMORIAL HOSPITAL

101 S 4TH ST
ISHPEMING, MI 49849

Medicare Hospital Provider Number: 230001

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	606	12	10 - 17	583	14	10 - 17
Cancer	5	80	18 - 84	14	50	24 - 73
Cerebrovascular Accidents	34	21	15 - 43	21	29	13 - 52
Gastrointestinal Catastrophes	7	71	11 - 73	6	33	9 - 76
Infectious Disease	16	31	18 - 64	8	13	11 - 64
Metabolic/Electrolyte Disorders	17	24	11 - 54	6	17	4 - 69
Pulmonary Disease	38	32	11 - 42	38	24	11 - 40
Renal Failure	4	50	6 - 85	1	100	0 - 98
Severe Acute Heart Disease	45	7	28 - 47	37	43	28 - 60
Severe Chronic Heart Disease	35	17	12 - 39	49	22	13 - 38
Severe Trauma	1	0	0 - 99	2	0	2 - 88
Gastrointestinal Disease	49	4	0 - 22	51	6	1 - 22
Gynecologic Disease	3	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	76	3	1 - 12	68	0	2 - 8
Musculoskeletal/Skin Conditions	66	2	0 - 13	65	5	0 - 25
Neuropsychiatric/Sensory Disease	22	0	0 - 55	13	0	0 -100
Urologic Disease	18	6	0 -100	13	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	99
Occupancy Rate (%):	39
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	26
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	0
Registered Nurses:	43
Licensed Practical Nurses:	39

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

FRANCIS A. BELL MEMORIAL HOSPITAL
101 SOUTH FOURTH STREET • ISHPEMING, MICHIGAN 49849 • 906/486-4431

ALFRED J. HENDRA
EXECUTIVE DIRECTOR

MEDICARE PROVIDER # 230001

October 24, 1988

Health Standards & Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

We have received Medicare hospital mortality information and have a few brief comments.

First, we noticed several errors in the Hospital Characteristics section. We have, however, been notified by the American Hospital Association that they have sent corrections to you to be used when the data is publicly released. (Our errors included listing of number of beds as 73; our actual number of beds is 99. Also we do have a Coronary Care unit.)

One characteristic of the mortality data is that the patients are categorized by their principal or admitting diagnosis. In most cases, this diagnosis is not the cause of death. For instance, we had two patients in the category of neuropsychiatric and sensory disease who expired. Both of these patients were in the hospital a long time waiting for nursing home placement and died from other causes. If the publicized data is broken down into DRG categories, a false assumption could be made about the % of patients in that category who expired.

In analyzing our data, we also found that we had a very high percentage of patients with concomitant conditions classified by HCFA as co-morbidities, including age. This fact is not apparent in the raw published statistics.

Thank you for your attention to our comments.

Sincerely,

Alfred J. Hendra
Executive Director

AJH/bds

GARDEN CITY OSTEOPATHIC HOSP

6245 NORTH INKSTER RD
GARDEN CITY, MI 48135

Medicare Hospital Provider Number: 230244

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,788	20	13 - 18	1,848	20	12 - 17
Cancer	49	39	28 - 58	45	36	21 - 52
Cerebrovascular Accidents	78	32	18 - 40	84	35	18 - 40
Gastrointestinal Catastrophes	12	58	13 - 66	12	17	12 - 59
Infectious Disease	32	47	19 - 55	41	39	21 - 54
Metabolic/Electrolyte Disorders	40	45	15 - 50	41	37	11 - 45
Pulmonary Disease	144	38	22 - 41	139	43	20 - 40
Renal Failure	12	67	22 - 82	15	53	22 - 80
Severe Acute Heart Disease	94	55	29 - 51	89	56	29 - 52
Severe Chronic Heart Disease	125	27	17 - 34	145	27	19 - 35
Severe Trauma	4	25	6 - 81	2	50	5 - 93
Gastrointestinal Disease	91	5	2 - 14	106	6	1 - 13
Gynecologic Disease	15	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	138	7	1 - 12	149	3	1 - 9
Musculoskeletal/Skin Conditions	97	1	1 - 9	122	2	1 - 9
Neuropsychiatric/Sensory Disease	84	1	0 - 11	88	5	0 - 24
Urologic Disease	73	0	0 - 9	74	5	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	349
Occupancy Rate (%):	50
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	189
Percent of Physicians Who Are Board Certified Specialists:	85
Interns and Residents:	53
Registered Nurses:	206
Licensed Practical Nurses:	36

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Medicare Provider 230244

Garden City Hospital
OSTEOPATHIC
6245 NORTH INKSTER ROAD • GARDEN CITY, MICHIGAN 48135
PHONE 421-3300

October 20, 1988

Health Standards & Quality Bureau, HCFA
Attn: Mrs. Sandra Kappert
2-D-2 Meadows East Bldg.
6325 Security Blvd.
Baltimore, MD 21207

SUBJECT: Release of Mortality Data

Garden City Hospital, Osteopathic, received and conducted a preliminary review of the mortality data compiled by the Health Care Financing Administration (HCFA). Further review of the Medicare patient data reported by HCFA and our medical records will be conducted by hospital and medical administration. Following are some of our concerns regarding the limitations of the data in this report and its use as a measure of quality.

1. Mortality is significantly impacted by differences in case mix. However, severity of illness is not included in HCFA's calculations of "Range for Predicted Mortality." Health consequences of illness for the elderly are higher than for the rest of the population. Social and economic environment can play a role in mortality statistics. Yet there is no effective mechanism in the analysis to account for any of these alternate health factors.

2. Outcome of mortality is only a measure of quality of care when it "should have" or "could have" been prevented. It has never been established that mortality data can detect differences in quality care. When we admit a patient with a life threatening disease process to provide an acute level of care in the terminal stage, the hospitalization is appropriate, even though the expected outcome is imminent death.

3. Medicare patients only are included in this data base. Though age is a characteristic, a five-year difference in the Medicare population can result in significant differences when it comes to mortality statistics. Mortality occurs more frequently in the very elderly. Our Medicare population includes a large percentage of the very elderly (over 84 years). Because only the last admission of a Medicare patient during 1987 is counted in the data base, the total number of patients included is substantially lower than the actual number of times Medicare patients were provided care at our hospital. Although Medicare patients constitute only a portion of our total patient base, the majority of mortalities occur in this population. Therefore, actual hospital mortality rates are very different than those based on the data available in the HCFA report. The HCFA analysis implies that the data implications apply to all of our admissions.

Health Standards & Quality Bureau
Health Care Financing Administration

4. Due to the structure and composition of HCFA's data base, as well as the resources available only to HCFA, and other factors, many hospitals are precluded from replicating the findings of the analysis. Specifically, we cannot verify that the mortalities on HCFA's report which occurred outside the hospital, were due to factors even remotely related to the previous hospital admission.

Garden City Hospital's administrative and medical staffs are utilizing this report as part of our ongoing quality assurance program. As a matter of course, we continually assess quality and take formalized actions where appropriate to prevent quality problems from arising. Every effort is made to ensure that our care meets the highest standards within the industry. Quality measures will be instituted if deemed necessary or appropriate as a result of our comprehensive and clinical analysis of the care provided to patients included in the HCFA report.

Sincerely,

Calvin C. Kay, D.O.
Senior Vice President Medical Affairs
Garden City Hospital, Osteopathic

CCK:lh
2382J53

GENESEE MEM HOSP

702 BALLENGER HWY
FLINT, MI 48502

Medicare Hospital Provider Number: 230114

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	116	3	1 - 10	132	6	3 - 13
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	1	0	1 - 97
Gastrointestinal Catastrophes	1	100	0 -100	2	0	0 - 93
Infectious Disease	1	0	2 - 98	0	-	-
Metabolic/Electrolyte Disorders	1	0	0 -100	0	-	-
Pulmonary Disease	2	50	1 - 93	4	0	4 - 71
Renal Failure	0	-	-	2	100	9 - 94
Severe Acute Heart Disease	0	-	-	2	50	4 - 93
Severe Chronic Heart Disease	0	-	-	4	50	7 - 83
Severe Trauma	0	-	-	1	0	0 - 98
Gastrointestinal Disease	8	0	0 -100	13	0	0 - 98
Gynecologic Disease	1	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	7	0	0 -100	10	0	0 - 97
Musculoskeletal/Skin Conditions	6	0	0 -100	5	0	0 -100
Neuropsychiatric/Sensory Disease	37	0	0 - 34	24	0	0 - 79
Urologic Disease	28	0	0 - 99	24	0	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	35
Occupancy Rate (%):	17
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	21
Percent of Physicians Who Are Board Certified Specialists:	90
Interns and Residents:	2
Registered Nurses:	30
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GERBER MEMORIAL HOSPITAL

212 S SULLIVAN ST
FREMONT, MI 49412

Medicare Hospital Provider Number: 230106

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	360	17	11 - 19	420	14	11 - 19
Cancer	9	67	23 - 80	12	25	19 - 68
Cerebrovascular Accidents	14	50	8 - 58	11	27	12 - 63
Gastrointestinal Catastrophes	8	38	13 - 74	2	0	2 - 88
Infectious Disease	5	60	8 - 80	2	100	8 - 91
Metabolic/Electrolyte Disorders	5	20	3 - 74	3	33	8 - 89
Pulmonary Disease	46	15	14 - 38	56	13	17 - 37
Renal Failure	1	100	0 - 99	3	100	8 - 84
Severe Acute Heart Disease	15	33	17 - 63	14	29	22 - 68
Severe Chronic Heart Disease	34	24	11 - 41	46	37	14 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	24	0	0 - 37	30	3	0 - 40
Gynecologic Disease	4	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	39	5	0 - 29	46	7	0 - 25
Musculoskeletal/Skin Conditions	26	12	0 - 57	47	0	0 - 13
Neuropsychiatric/Sensory Disease	1	100	0 - 99	2	0	0 -100
Urologic Disease	5	20	0 -100	8	0	0 - 72

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	82
Occupancy Rate (%):	24
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	30
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	45
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

GLADWIN HOSPITAL

455 QUARTER STREET
GLADWIN, MI 48624

Medicare Hospital Provider Number: 230189

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	423	7	9 - 14	436	8	8 - 14
Cancer	3	67	11 - 92	2	50	7 - 96
Cerebrovascular Accidents	16	13	8 - 45	10	10	9 - 54
Gastrointestinal Catastrophes	4	25	2 - 82	1	0	0 - 99
Infectious Disease	3	0	2 - 80	5	20	5 - 74
Metabolic/Electrolyte Disorders	6	17	6 - 69	2	0	0 - 94
Pulmonary Disease	46	11	14 - 36	42	17	14 - 39
Renal Failure	2	100	5 - 90	1	0	2 - 97
Severe Acute Heart Disease	16	31	24 - 68	15	33	17 - 63
Severe Chronic Heart Disease	20	20	11 - 48	33	18	12 - 40
Severe Trauma	2	0	1 - 92	0	-	-
Gastrointestinal Disease	38	3	0 - 29	45	2	0 - 30
Gynecologic Disease	1	0	0 -100	0	-	-
Low-Risk Heart Disease	93	2	1 - 10	83	5	0 - 16
Musculoskeletal/Skin Conditions	22	5	0 - 65	34	0	0 - 34
Neuropsychiatric/Sensory Disease	5	0	0 - 96	5	0	0 -100
Urologic Disease	5	0	0 -100	7	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	42
Occupancy Rate (%):	55
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	10
Percent of Physicians Who Are Board Certified Specialists:	30
Interns and Residents:	0
Registered Nurses:	15
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GLADWIN AREA HOSPITAL
A Subsidiary of
MID-MICHIGAN
HEALTH CARE

October 13, 1988

William L. Roper, M. D., Administrator
Health Care Financing Administration
Department of Health and Human Services
Washington DC, 20201

RE: Medicare Provider Number #230189

Dear Dr. Roper,

We are in receipt of the package of data from the Health Care Financing Administration regarding Medicare mortality rates at our facility. Prior to public release of this data we would like to offer the following comments.

We appreciate the opportunity to review the data prior to publication and the chance to submit our comments for inclusion with the release. It is our hope that the data will be as accurate as possible to avoid any distortion of the statistics or misrepresentation of the facts.

Upon receipt of the data we reviewed the information on a case by case basis, and compared the information to our hospital records. We recognize that a concerted effort was made to improve the methodology over the data released in the last two years, however we still have some concerns.

As Gladwin Area Hospital is a very small institution some categories include a very small number of cases, which, because of the small statistical sample, can result in a very high percentage. Another complicating factor is that many of our patients are very elderly and may utilize our facility during the very late stages of their disease.

Furthermore, there may be patient characteristics in addition to those used within the model, which may have an effect on mortality. Variations from the predicted range may in fact be due to other patient characteristics or events unrelated to hospitalization, statistical chance and/or quality of care.

Through our Quality Assurance program and our Mortality screening and review process all deaths which occur in the institution are thoroughly investigated. This investigation is aimed at detecting

potential quality problems, and if a trend is identified taking the appropriate corrective action. The data provided by HCFA will be included in our Quality Assurance program as part of our continuing effort to identify problems within our institution.

We appreciate the efforts that HCFA has made to improve the methodology by which data is compiled. There may however be elements which would lead an untrained individual to draw conclusions other than those which are fact. Therefore, we encourage anyone who has a concern as a result of this release of data to talk to his or her physician or to contact a hospital representative.

As an organization with a strong committment to improving the quality of care we provide, we welcome any source of information which assists us in our efforts to provide and monitor quality care.

Sincerely,

Joseph M. Smith,
President

JMS/nf

GRACE HOSP-NORTHWESTERN UNIT

18700 MYERS RD
DETROIT, MI 48235

Medicare Hospital Provider Number: 230128

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,381	18	12 - 17	2,046	17	12 - 17
Cancer	104	42	29 - 52	102	43	28 - 52
Cerebrovascular Accidents	81	20	16 - 35	71	20	16 - 36
Gastrointestinal Catastrophes	27	33	14 - 53	19	37	11 - 56
Infectious Disease	166	46	28 - 49	110	50	28 - 53
Metabolic/Electrolyte Disorders	67	27	14 - 42	71	23	12 - 38
Pulmonary Disease	149	44	18 - 37	100	35	18 - 40
Renal Failure	31	35	17 - 67	16	44	16 - 74
Severe Acute Heart Disease	74	47	29 - 53	83	33	27 - 49
Severe Chronic Heart Disease	110	23	13 - 31	104	31	15 - 34
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	146	3	1 - 9	124	5	0 - 12
Gynecologic Disease	16	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	297	4	1 - 7	312	3	2 - 6
Musculoskeletal/Skin Conditions	114	3	1 - 10	110	3	1 - 10
Neuropsychiatric/Sensory Disease	44	2	0 - 34	49	2	0 - 21
Urologic Disease	115	0	0 - 6	82	0	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	296
Occupancy Rate (%):	81
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	645
Percent of Physicians Who Are Board Certified Specialists:	80
Interns and Residents:	0
Registered Nurses:	506
Licensed Practical Nurses:	67

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

GRACE HOSPITAL

COMMENTS: MEDICAL HOSPITAL MORTALITY INFORMATION

Grace Hospital is a full service teaching hospital located in the city of Detroit. The hospital serves a large Medicare population that reflects the socio-economic background and general health habits of the city's population, including a large indigent group.

A significant number of the hospital's Medicare patients come from nursing homes and are admitted with end-stage diseases. That is particularly true in the pulmonary disease category where a combination of patient age and disease stage mitigate against successful recovery.

It should be particularly noted that 82.5% of all Medicare patients whose illnesses resulted in death were between the ages of 70 and 100 years old.

GRAND VIEW HOSPITAL

N10561 GRAND VIEW LANE
IRONWOOD, MI 49938

Medicare Hospital Provider Number: 230143

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	624	15	10 - 17	619	16	12 - 19
Cancer	14	57	16 - 65	14	43	21 - 70
Cerebrovascular Accidents	38	32	12 - 42	29	38	12 - 48
Gastrointestinal Catastrophes	15	27	16 - 62	9	11	12 - 62
Infectious Disease	12	33	17 - 68	16	50	21 - 68
Metabolic/Electrolyte Disorders	3	33	6 - 88	9	11	8 - 58
Pulmonary Disease	49	31	15 - 43	48	35	22 - 50
Renal Failure	3	67	7 - 89	4	25	7 - 84
Severe Acute Heart Disease	23	48	18 - 58	29	55	25 - 61
Severe Chronic Heart Disease	45	20	12 - 36	38	29	10 - 40
Severe Trauma	1	100	2 - 97	1	0	3 - 99
Gastrointestinal Disease	51	4	0 - 21	46	4	0 - 22
Gynecologic Disease	7	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	75	1	0 - 11	93	3	1 - 12
Musculoskeletal/Skin Conditions	50	2	1 - 15	40	2	0 - 38
Neuropsychiatric/Sensory Disease	7	14	0 -100	14	7	0 - 69
Urologic Disease	2	0	0 -100	4	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	72
Occupancy Rate (%):	33
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	16
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	30
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

230143

QUALITY HEALTH CARE CLOSE TO YOU

GRAND VIEW HOSPITAL

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

I have reviewed the Mortality Data as compiled for my facility. Although my hospital falls in the predicted ranges for all diagnostic categories, I question the statistical validity of this report.

I quote from your technical description of the Analysis of Mortality Rates, "It is important to note that the fewer the number of cases included in a given diagnostic category the greater the uncertainty of the expected mortality range." My hospital's data shows several categories with less than ten (10) cases.

I am glad that you are stressing the fact that this information by itself is not a complete measure of the quality of care at an individual hospital. Dealing with small patient populations can produce misleading figures since rates can be dramatically altered by a single case.

Sincerely yours,

Wayne Hellerstedt
Executive Director

nm

N10561 GRAND VIEW LANE . IRONWOOD, MICHIGAN 49938 . 906/932-2525 . SERVING THE PEOPLE OF THE GOGEBIC RANGE SINCE 1921

GRATIOT COMMUNITY HOSPITAL

300 WARWICK DRIVE
ALMA, MI 48801

Medicare Hospital Provider Number: 230030

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	958	14	9 - 15	1,004	14	10 - 15
Cancer	23	43	25 - 65	24	42	25 - 65
Cerebrovascular Accidents	39	28	15 - 44	35	23	15 - 44
Gastrointestinal Catastrophes	15	47	17 - 66	9	44	9 - 69
Infectious Disease	8	13	13 - 65	7	71	11 - 73
Metabolic/Electrolyte Disorders	14	29	9 - 57	10	30	6 - 63
Pulmonary Disease	46	30	11 - 40	55	27	14 - 40
Renal Failure	5	20	6 - 78	6	33	6 - 78
Severe Acute Heart Disease	47	49	28 - 57	39	49	30 - 62
Severe Chronic Heart Disease	43	47	11 - 41	60	20	13 - 34
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	72	3	1 - 13	100	6	1 - 15
Gynecologic Disease	13	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	162	4	1 - 9	138	2	1 - 8
Musculoskeletal/Skin Conditions	93	2	0 - 12	93	2	0 - 11
Neuropsychiatric/Sensory Disease	38	5	0 - 72	39	0	0 - 17
Urologic Disease	39	3	0 - 76	32	3	0 - 52

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	94
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	58
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	109
Licensed Practical Nurses:	44

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Gratiot Community Hospital



23-0030

A Community of Service

GRATIOT COMMUNITY HOSPITAL's RESPONSE
to the Release of Medicare
Mortality Data by the
Health Care Financing Administration

Submitted by: Gratiot Community Hospital
300 Warwick Drive
Alma, Michigan 48801
517/463-1101, extension 225

Contact: Philip H. Kell, President

Gratiot Community Hospital is a HCFA designated Rural Referral Center located in Gratiot County, the geographic center of Michigan's Lower Peninsula. The hospital serves a primary service area of 50,000 population, and draws patients from several hundred square miles of rural secondary and tertiary service area.

The mortality data in the HCFA report represent Medicare patients, who account for approximately 35% of inpatient admissions at this hospital. It also includes patients who dies within 30 days of admission to the hospital. IN several cases, these patients have been discharged from the hospital and die of unrelated causes. Therefore, these mortality rates should not be interpreted as hospital-wide rates.

Assessment of the quality of care provided in this hospital involves a wide variety of activities. Mortality review is an integral part of that process, which assesses the care provided and the level of severity of illness each patient experienced. HCFA's mortality statistics do not account for all of the applicable clinical factors used in this process.

Comparison of the two years of HCFA data reveals two categories which demonstrate noticeable differences. Severe chronic heart disease implies an increased mortality rate in 1987. Review of the cases involved has not identified any unexpected mortality, given the ages, and multiple coexisting illnesses of these patients. The infectious disease category displays a significant decrease in mortality rate. This is a statistical anomaly due to the small size of this category of patients. As additional years of data are available, the significance of these differences will be more clear.

The 'Hospital Characteristics' information accompanying the data is misleading in two respects. Under Specialty Services, Gratiot Community Hospital is listed as not having a Coronary Care Unit. In fact, the hospital has an Intensive Care Unit which provides Coronary Care, but is considered a 'Mixed' unit due to additional conditions treated there. This hospital has a Hemodialysis Center, but not an Organ Transplant Service. Also, the listing of Registered Nurses Per Bed is artificially high due to the inclusion of all nurses on staff and exclusion of some of the beds (Obstetric and Psychiatric) they staff.

We welcome HCFA's attempts to provide a format for comparative analysis of the care provided in this country, with the understanding that these efforts are preliminary and continually being revised and assessed for validity.

END

HACKLEY HOSPITAL

1700 CLINTON STREET
MUSKEGON, MI 49443

Medicare Hospital Provider Number: 230066

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,826	12	10 - 14	1,779	12	10 - 14
Cancer	86	31	26 - 50	62	40	26 - 54
Cerebrovascular Accidents	60	30	14 - 38	73	21	16 - 36
Gastrointestinal Catastrophes	18	28	13 - 57	15	33	16 - 64
Infectious Disease	26	27	18 - 54	19	53	18 - 62
Metabolic/Electrolyte Disorders	34	29	14 - 49	27	15	13 - 46
Pulmonary Disease	75	29	13 - 37	82	34	15 - 38
Renal Failure	6	50	12 - 83	4	50	12 - 91
Severe Acute Heart Disease	71	34	25 - 49	76	41	27 - 51
Severe Chronic Heart Disease	102	24	13 - 31	87	32	15 - 36
Severe Trauma	0	-	-	3	0	7 - 81
Gastrointestinal Disease	98	2	0 - 11	123	1	1 - 7
Gynecologic Disease	34	0	0 -100	42	0	0 -100
Low-Risk Heart Disease	193	6	1 - 10	186	4	1 - 9
Musculoskeletal/Skin Conditions	176	2	1 - 7	147	1	1 - 6
Neuropsychiatric/Sensory Disease	50	2	0 - 24	65	0	0 - 13
Urologic Disease	87	1	0 - 13	81	1	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	330
Occupancy Rate (%):	44
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	160
Percent of Physicians Who Are Board Certified Specialists:	85
Interns and Residents:	0
Registered Nurses:	187
Licensed Practical Nurses:	83

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

HACKLEY HOSPITAL

October 20, 1988

Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

Re: Mortality Data
Hospital ID No. 230066

Dear Ms. Kappert:

Upon review of our revised 1986 mortality information I have the following concerns regarding its accuracy:

1) The total number of cases, "all causes", reported last year was 1848 and the revised total is only 1779.

2) The total number of "cancer" cases last year was 167 and the revised total is 62.

3) Revised totals for GI catastrophic and GI disease categories were decreased from last year by 25 and 51 respectively.

4) Revised total for pulmonary disease was decreased from last year by 52.

5) Last years total for severe trauma was 59; the revised total 3.

6) We show an increase in the low-risk heart disease category from 102 to 186 and an increase in musculoskeletal and cutaneous from 95 to 147.

The remaining categories do not demonstrate such marked differences. Of course, the mortality rates have changed markedly to correspond to the altered data.

Please issue a corrected copy for calendar year 1986.

Very truly yours,

Patricia J. Fowler clb

Patricia J. Fowler
Manager, Quality Assessment

clb

HARBOR BEACH COMMUNITY HOSPITAL

1ST BROAD ST
HARBOR BEACH, MI 48441

Medicare Hospital Provider Number: 230213

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	189	13	8 - 19	177	7	7 - 16
Cancer	2	100	11 - 98	2	0	5 - 89
Cerebrovascular Accidents	4	25	2 - 80	5	20	3 - 74
Gastrointestinal Catastrophes	1	0	1 - 97	0	-	-
Infectious Disease	1	0	0 - 99	0	-	-
Metabolic/Electrolyte Disorders	3	67	4 - 86	3	0	3 - 80
Pulmonary Disease	20	20	9 - 47	14	21	10 - 55
Renal Failure	1	0	0 - 99	0	-	-
Severe Acute Heart Disease	12	42	15 - 66	6	33	9 - 75
Severe Chronic Heart Disease	19	26	10 - 50	11	9	9 - 51
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	31	0	0 - 21	23	0	0 - 57
Gynecologic Disease	0	-	-	2	0	0 -100
Low-Risk Heart Disease	17	0	0 - 65	21	0	1 - 26
Musculoskeletal/Skin Conditions	15	0	0 - 72	13	0	0 - 95
Neuropsychiatric/Sensory Disease	3	0	0 -100	2	0	0 -100
Urologic Disease	5	0	0 -100	7	14	0 - 87

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	67
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	9
Percent of Physicians Who Are Board Certified Specialists:	33
Interns and Residents:	0
Registered Nurses:	11
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HARPER GRACE HOSP

3990 JOHN R STREET
DETROIT, MI 48201

Medicare Hospital Provider Number: 230104

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,633	12	10 - 14	3,884	11	9 - 13
Cancer	337	45	31 - 48	290	40	33 - 51
Cerebrovascular Accidents	119	15	17 - 32	87	10	16 - 31
Gastrointestinal Catastrophes	32	34	14 - 51	23	35	14 - 55
Infectious Disease	35	40	18 - 53	32	28	20 - 55
Metabolic/Electrolyte Disorders	83	25	14 - 40	103	29	16 - 40
Pulmonary Disease	131	29	18 - 37	115	41	17 - 38
Renal Failure	20	20	9 - 61	15	27	15 - 71
Severe Acute Heart Disease	129	29	26 - 45	91	36	27 - 49
Severe Chronic Heart Disease	108	19	16 - 32	126	14	14 - 28
Severe Trauma	3	67	2 - 87	7	0	10 - 58
Gastrointestinal Disease	124	5	1 - 11	151	5	0 - 12
Gynecologic Disease	12	0	0 -100	21	0	0 -100
Low-Risk Heart Disease	557	4	1 - 6	623	4	2 - 5
Musculoskeletal/Skin Conditions	248	2	0 - 7	322	1	0 - 4
Neuropsychiatric/Sensory Disease	327	1	0 - 6	368	2	0 - 6
Urologic Disease	120	1	0 - 10	147	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	659
Occupancy Rate (%):	81
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	546
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	0
Registered Nurses:	749
Licensed Practical Nurses:	153

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

HAYES GREEN BEACH MEMORIAL HOSPITAL

321 HARRIS STREET
CHARLOTTE, MI 48813

Medicare Hospital Provider Number: 230006

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	316	9	9 - 16	273	16	10 - 19
Cancer	3	33	13 - 94	3	67	9 - 89
Cerebrovascular Accidents	8	13	7 - 60	14	36	11 - 59
Gastrointestinal Catastrophes	1	0	0 - 99	0	-	-
Infectious Disease	12	33	14 - 65	15	47	15 - 64
Metabolic/Electrolyte Disorders	3	33	4 - 86	9	33	3 - 66
Pulmonary Disease	13	8	9 - 46	24	13	15 - 45
Renal Failure	4	25	10 - 86	1	100	2 -100
Severe Acute Heart Disease	13	23	13 - 59	10	60	16 - 71
Severe Chronic Heart Disease	32	16	13 - 40	15	40	7 - 56
Severe Trauma	2	50	1 - 93	0	-	-
Gastrointestinal Disease	31	0	0 - 20	23	0	0 - 56
Gynecologic Disease	2	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	45	2	0 - 20	25	8	0 - 77
Musculoskeletal/Skin Conditions	23	4	0 - 84	26	8	0 - 56
Neuropsychiatric/Sensory Disease	4	0	0 -100	4	0	0 -100
Urologic Disease	13	0	0 - 50	12	8	0 - 79

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	46
Occupancy Rate (%):	39
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	13
Percent of Physicians Who Are Board Certified Specialists:	62
Interns and Residents:	0
Registered Nurses:	26
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HELEN NEWBERRY JOY HOSP

502 W HARRIE STREET
NEWBERRY, MI 49868

Medicare Hospital Provider Number: 230191

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	210	12	9 - 19	157	8	10 - 20
Cancer	7	86	24 - 80	4	75	18 - 92
Cerebrovascular Accidents	9	11	13 - 61	7	0	7 - 53
Gastrointestinal Catastrophes	1	0	2 - 97	1	100	2 - 97
Infectious Disease	2	50	3 - 92	0	-	-
Metabolic/Electrolyte Disorders	2	100	6 - 90	9	22	7 - 63
Pulmonary Disease	25	12	11 - 41	17	0	7 - 31
Renal Failure	0	-	-	3	33	10 - 92
Severe Acute Heart Disease	6	17	11 - 72	5	40	4 - 77
Severe Chronic Heart Disease	17	12	8 - 43	20	15	8 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	16	13	0 - 95	10	0	0 - 92
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	22	0	0 - 28	23	0	0 - 27
Musculoskeletal/Skin Conditions	16	6	0 - 99	15	0	0 - 97
Neuropsychiatric/Sensory Disease	5	0	0 -100	1	0	0 -100
Urologic Disease	5	0	0 -100	2	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	43
Occupancy Rate (%):	26
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	5
Percent of Physicians Who Are Board Certified Specialists:	40
Interns and Residents:	0
Registered Nurses:	9
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HENRY FORD HOSPITAL

2799 W GRAND BLVD
DETROIT, MI 48202

Medicare Hospital Provider Number: 230053

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	5,749	11	10 - 14	6,096	12	11 - 15
Cancer	248	33	31 - 49	311	38	33 - 51
Cerebrovascular Accidents	234	20	19 - 32	292	19	19 - 31
Gastrointestinal Catastrophes	55	33	22 - 53	51	31	21 - 51
Infectious Disease	81	40	24 - 50	84	46	25 - 52
Metabolic/Electrolyte Disorders	144	38	20 - 44	149	33	19 - 42
Pulmonary Disease	232	31	19 - 35	242	29	21 - 37
Renal Failure	76	7	9 - 52	47	26	10 - 59
Severe Acute Heart Disease	157	30	29 - 47	199	26	29 - 45
Severe Chronic Heart Disease	279	14	16 - 26	296	18	17 - 29
Severe Trauma	7	29	5 - 70	19	21	9 - 52
Gastrointestinal Disease	254	4	1 - 7	308	4	1 - 7
Gynecologic Disease	26	0	0 -100	33	0	0 - 99
Low-Risk Heart Disease	687	4	2 - 5	634	3	2 - 5
Musculoskeletal/Skin Conditions	472	4	1 - 6	516	2	1 - 5
Neuropsychiatric/Sensory Disease	306	3	1 - 7	256	4	1 - 8
Urologic Disease	344	1	0 - 5	328	1	0 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	837
Occupancy Rate (%):	86
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	552
Percent of Physicians Who Are Board Certified Specialists:	62
Interns and Residents:	323
Registered Nurses:	1,374
Licensed Practical Nurses:	230

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

HERITAGE HOSP

24775 HAIG AVE
TAYLOR, MI 48180

Medicare Hospital Provider Number: 230270

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,555	17	11 - 16	1,621	17	11 - 16
Cancer	51	49	28 - 58	53	43	29 - 58
Cerebrovascular Accidents	56	32	15 - 41	69	33	18 - 41
Gastrointestinal Catastrophes	11	73	16 - 68	11	45	15 - 71
Infectious Disease	20	30	20 - 61	20	40	21 - 64
Metabolic/Electrolyte Disorders	26	27	8 - 46	33	15	7 - 39
Pulmonary Disease	114	30	18 - 37	128	32	18 - 38
Renal Failure	9	44	16 - 81	18	67	23 - 78
Severe Acute Heart Disease	84	49	25 - 49	71	48	28 - 53
Severe Chronic Heart Disease	117	30	15 - 33	91	29	14 - 34
Severe Trauma	2	50	1 - 93	2	50	1 - 93
Gastrointestinal Disease	113	5	1 - 13	155	6	1 - 11
Gynecologic Disease	7	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	222	4	2 - 8	225	4	1 - 8
Musculoskeletal/Skin Conditions	77	3	0 - 15	103	5	0 - 15
Neuropsychiatric/Sensory Disease	78	1	1 - 10	44	5	0 - 78
Urologic Disease	63	3	0 - 35	80	0	1 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	271
Occupancy Rate (%):	68
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	220
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	215
Licensed Practical Nurses:	23

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HERRICK MEM HOSP

500 E POTTAWATAMIE ST
TECUMSEH, MI 49286

Medicare Hospital Provider Number: 230120

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	247	12	7 - 16	349	9	8 - 15
Cancer	4	50	5 - 82	5	40	6 - 78
Cerebrovascular Accidents	17	18	9 - 48	9	0	13 - 51
Gastrointestinal Catastrophes	0	-	-	3	0	4 - 79
Infectious Disease	1	0	0 - 98	6	17	8 - 70
Metabolic/Electrolyte Disorders	3	67	1 - 89	5	20	3 - 74
Pulmonary Disease	11	18	5 - 55	19	11	9 - 42
Renal Failure	1	100	3 - 98	1	0	0 - 98
Severe Acute Heart Disease	12	50	22 - 74	19	63	21 - 63
Severe Chronic Heart Disease	14	29	8 - 55	22	18	11 - 45
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	18	0	0 - 88	34	3	0 - 30
Gynecologic Disease	2	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	27	7	0 - 65	49	2	1 - 16
Musculoskeletal/Skin Conditions	28	0	0 - 79	24	0	0 - 52
Neuropsychiatric/Sensory Disease	1	0	0 -100	11	0	0 - 70
Urologic Disease	17	0	0 - 90	18	0	0 - 97

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	91
Ownership/Control:	Local Government

STAFFING

Interns and Residents:	0
Registered Nurses:	49
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HILLS AND DALE GENERAL HOSP

4675 HILL ST
CASS CITY, MI 48726

Medicare Hospital Provider Number: 230188

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	256	8	9 - 16	273	13	9 - 18
Cancer	1	0	1 - 97	3	67	9 - 89
Cerebrovascular Accidents	3	0	2 - 80	7	57	8 - 72
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	4	25	12 - 85	4	25	3 - 80
Metabolic/Electrolyte Disorders	2	50	0 - 96	2	0	0 - 93
Pulmonary Disease	68	12	14 - 33	60	18	15 - 37
Renal Failure	1	0	2 - 97	0	-	-
Severe Acute Heart Disease	6	33	7 - 74	10	40	17 - 72
Severe Chronic Heart Disease	12	8	4 - 46	12	42	8 - 61
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	24	0	0 - 36	31	0	0 - 23
Gynecologic Disease	4	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	47	4	0 - 25	44	5	0 - 29
Musculoskeletal/Skin Conditions	16	6	0 - 78	12	17	0 -100
Neuropsychiatric/Sensory Disease	1	0	0 -100	13	8	0 - 99
Urologic Disease	12	0	0 -100	13	8	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	65
Occupancy Rate (%):	34
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	8
Percent of Physicians Who Are Board Certified Specialists:	25
Interns and Residents:	0
Registered Nurses:	19
Licensed Practical Nurses:	20

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HILLSDALE COMMUNITY HEALTH CENTER

168 S HOWELL STREET
HILLSDALE, MI 49242

Medicare Hospital Provider Number: 230037

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	414	9	7 - 14	459	11	9 - 16
Cancer	2	0	2 - 89	3	33	6 - 87
Cerebrovascular Accidents	21	29	11 - 49	25	40	14 - 52
Gastrointestinal Catastrophes	3	67	7 - 88	6	33	6 - 74
Infectious Disease	3	67	6 - 87	6	17	6 - 69
Metabolic/Electrolyte Disorders	4	50	2 - 84	4	0	6 - 71
Pulmonary Disease	34	12	8 - 34	42	10	10 - 32
Renal Failure	2	50	2 - 92	1	0	0 - 98
Severe Acute Heart Disease	19	16	25 - 60	31	29	22 - 55
Severe Chronic Heart Disease	25	20	10 - 43	29	17	11 - 40
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	55	5	0 - 26	37	8	0 - 76
Gynecologic Disease	4	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	58	0	1 - 9	66	5	1 - 17
Musculoskeletal/Skin Conditions	28	4	0 - 91	27	0	0 - 38
Neuropsychiatric/Sensory Disease	8	0	0 -100	13	0	0 -100
Urologic Disease	7	0	0 -100	9	0	0 - 95

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	86
Occupancy Rate (%):	31
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	17
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	36
Licensed Practical Nurses:	24

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

HOLLAND COMMUNITY HOSPITAL

602 MICHIGAN AVE
HOLLAND, MI 49423

Medicare Hospital Provider Number: 230072

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,455	11	10 - 15	1,351	11	9 - 14
Cancer	53	57	31 - 60	34	53	31 - 66
Cerebrovascular Accidents	63	19	19 - 40	46	28	16 - 43
Gastrointestinal Catastrophes	6	50	12 - 80	10	20	9 - 62
Infectious Disease	21	19	15 - 52	16	25	15 - 59
Metabolic/Electrolyte Disorders	17	41	12 - 59	19	16	7 - 46
Pulmonary Disease	83	19	15 - 35	60	15	14 - 35
Renal Failure	10	60	12 - 75	5	20	11 - 82
Severe Acute Heart Disease	48	33	27 - 55	61	43	27 - 53
Severe Chronic Heart Disease	74	26	13 - 34	62	29	14 - 37
Severe Trauma	3	33	2 - 86	2	100	11 - 96
Gastrointestinal Disease	98	6	1 - 16	126	6	1 - 13
Gynecologic Disease	19	0	0 -100	23	0	0 -100
Low-Risk Heart Disease	173	3	1 - 8	129	2	1 - 8
Musculoskeletal/Skin Conditions	135	1	1 - 6	118	3	0 - 12
Neuropsychiatric/Sensory Disease	21	0	0 - 57	35	6	0 - 69
Urologic Disease	81	0	0 - 9	89	0	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	217
Occupancy Rate (%):	49
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	93
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	174
Licensed Practical Nurses:	65

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HOLLAND
COMMUNITY
HOSPITAL

602 Michigan Avenue
Holland, Michigan 49423-4999
Phone 616-392-5141

October 3, 1988

Health Care Finance Administration
Health Standards and Quality Bureau
Hospital Mortality Information
Post Office Box 26684
Baltimore, Maryland 21207

Subject: Holland Community Hospital (Medicare Provider Number 230072) Comments Regarding the Health Care Financing Administration Publication of 1987 Mortality Information.

Dear Dr. Roper:

Holland Community Hospital (HCH) submits the following comments to HCFA in response to the September 15, 1988, HCFA letter to hospital administrators regarding the HCFA plans to publish selected mortality information about all short-term acute care hospitals which treated Medicare patients in 1987.

Improvement in the quality of medical care delivered to all patients is a primary goal of Holland Community Hospital. Objective measurement, analysis, and dissemination of information about quality is key to achieving that goal. The release of data on quality performance to the public can promote consumer awareness of quality differences and may assist their decision-making. To that end, HCFA's publication of hospital mortality data has the potential of being a laudable effort.

Nevertheless, the reliability, accuracy and interpretation of such information is critical to the public's understanding and effective use of this data. Consequently, HCFA's tentative confidence in both the validity and usefulness of mortality information as reflective of a hospital's quality performance is of significant concern. In several instances, HCFA has stated awareness of the shortcomings in both the data and methodology. HCFA notices have stated "mortality rate at a given hospital reflects, among other factors, the age, sex, diagnosis and severity of illness of patients admitted to that hospital." HCFA has also stated in notices that "not all of the factors affecting the probability of death in a particular case, most notably severity of illness, are included in the predictive model." HCFA notices have also stated that "a difference between a hospital's actual and expected mortality rates cannot be definitely constructed as reflecting especially high or low quality of care. This difference may, in fact, result from factors not included in the predictive model."

HOLLAND
COMMUNITY
HOSPITAL
602 Michigan Avenue
Holland, Michigan 49423-4999
Phone 616-392-5141

Since HCFA plans to proceed with publication of mortality rates despite reservations and a lack of complete confidence and validity of the data and analysis methods, HCH is concerned about the methodology and potential misinterpretation of this data by the public. Holland Community Hospital supports the following recommendations to improve the proposed process for review and release of the data:

1. HCFA has stated in notices that the proposed methodology does not account for intensity or severity of patient illness. The absence of this factor in the mortality calculations will render erroneous and misleading results for many hospitals. HCFA should provide the public with examples of how this could occur and stress that severity of illness is unaccounted for.

2. HCFA has also stated in notices that the fewer the number of admissions, the less reliable the statistical outcome. HCFA should use a minimum threshold of admissions for each category reporting a specific mortality rate. If the minimum threshold is not attained by the hospital, then no statistical rate should be published.

3. This year, hospitals received from HCFA a listing of all patients whose last admission in 1987 was in that facility. All deaths that occurred among those patients were reported, regardless of whether or not the death occurred within 30 days. For the statistical analysis, however, only deaths that occurred within 30 days of the last admission were used. There is concern that the 30-day post-admission period will lead to the inclusion of many deaths in the mortality data that are unrelated to the reason for admission. For instance, accidental deaths or deaths due to other complicating illnesses could occur which have little or no relationship to the previous hospital stay. It is recommended that either a shorter time period be used, i.e., one week post-discharge, and that certain types of deaths, e.g., accidents, be removed from the data.

4. The data categorizes deaths according to principal diagnosis and compares actual hospital experience with expected ranges from a predictive model. Some patients do not die from the principal diagnosis. For example, a patient may be admitted for surgical fixation of a fractured hip, but expire from a fat embolus prior to surgery. The data will show this patient as an orthopedic death. However, if the patient had been admitted postoperatively for treatment of the embolism, he would have been classified as a medical death.

HOLLAND
COMMUNITY
HOSPITAL
602 Michigan Avenue
Holland, Michigan 49423-4999
Phone 616-392-5141

HCFA should develop and utilize a more accurate methodology for data analysis which takes into account significant clinical factors in addition to principal diagnosis.

5. The HCFA data does not show the source of the patient's admission. Patients admitted through the emergency department may be generally high-risk candidates compared to other patients. Likewise, patients admitted from nursing homes tend to be more critically ill than those admitted from their own homes. HCFA should use a more accurate methodology of data analysis which takes into account patient admission source.

We appreciate the opportunity to present our comments on HCFA's proposed release of hospital mortality information, and we ask your careful consideration of our recommendations.

Sincerely,

David Andersen
President

HOLY CROSS HOSPITAL

4777 E OUTER DRIVE
DETROIT, MI 48234

Medicare Hospital Provider Number: 230065

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,545	14	11 - 15	1,613	14	11 - 16
Cancer	61	44	26 - 54	48	50	29 - 60
Cerebrovascular Accidents	67	22	15 - 36	89	27	16 - 36
Gastrointestinal Catastrophes	20	15	16 - 53	19	32	15 - 58
Infectious Disease	10	50	11 - 68	22	36	20 - 61
Metabolic/Electrolyte Disorders	29	38	10 - 49	39	31	13 - 47
Pulmonary Disease	88	27	18 - 40	63	29	17 - 41
Renal Failure	13	31	18 - 76	5	40	11 - 86
Severe Acute Heart Disease	91	36	28 - 50	115	38	28 - 49
Severe Chronic Heart Disease	120	25	14 - 31	126	29	14 - 32
Severe Trauma	1	0	0 - 99	5	20	2 - 76
Gastrointestinal Disease	106	2	1 - 9	114	5	1 - 12
Gynecologic Disease	10	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	272	2	1 - 6	295	2	2 - 6
Musculoskeletal/Skin Conditions	119	6	1 - 13	91	2	1 - 10
Neuropsychiatric/Sensory Disease	18	6	0 - 82	25	0	0 - 41
Urologic Disease	67	6	0 - 41	68	0	1 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	325
Occupancy Rate (%):	43
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	236
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	189
Licensed Practical Nurses:	46

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Holy Cross Hospital Response to HCFA Mortality Rate Data Release

Despite the complexity and apparent sophistication of the methods used by HCFA to generate "predicted" mortality rates, they have provided only averages. This has the potential of causing more confusion for the public rather than providing clarification and insight into a hospital's quality of care. The release of the data has the possibility of misinterpretation in that the public may identify the rates for all patients, when in fact, it is for Medicare patients alone.

By HCFA's own definition, "it is important to note that the fewer the number of cases included in a given diagnostic category, the greater the uncertainty of the expected mortality range"[1]. It is noteworthy that Holy Cross Hospital's rates are within the "predicted rates" for both 1986 and 1987. Holy Cross Hospital, within the identified 16 diagnostic categories, has a sample of 20 or less in 6 of the DRG categories. Furthermore, 10 of these DRG categories identify less than 20 deaths and 2 have no deaths at all.

Over 80% of Holy Cross Hospital's Medicare admissions are elderly (average age 77). One of every five Medicare patients who expired was over the age of 85 and 3 of every 5 were over the age of 75. The patients had 2 or more co-morbidities and a poor prognosis at the time of admission. Because of these factors (severity of illness, co-morbidities, age), 15% of the cases identified by HCFA died within the first 24 hours of admission. Furthermore, because of hospital location, the socio-economic factors are of significance.

Comparison between Holy Cross Hospital's actual rate to a "predicted" mortality rate should not be an indicator of quality of care as quality determinants are not measured in the data. These determinants include complication rates, readmission rates and whether there is continuous quality monitoring at various hospitals.

Holy Cross Hospital features an on-going Quality Assurance Program which reviews all pertinent data on a monthly basis, recommends appropriate corrective action as necessary and oversees the effecting of numerous quality assurance activities. In the review of 1987 deaths, the physician component identified that the deaths were unpreventable and predictable.

In the future, consideration in gathering such data relative to quality indicators may provide more accurate data on the quality of care rendered within a facility rather than mortality rates as a sole indicator.

Medicare Provider Number :23-0065

[1] Technical Description of the Analysis of the Mortality Rates, 1988.

HURLEY HOSP

6TH BEGOLE STS
FLINT, MI 48502

Medicare Hospital Provider Number: 230132

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,482	12	11 - 15	1,505	13	10 - 15
Cancer	54	31	29 - 57	49	39	29 - 59
Cerebrovascular Accidents	51	22	15 - 39	51	35	18 - 45
Gastrointestinal Catastrophes	15	47	12 - 62	12	25	10 - 61
Infectious Disease	27	41	17 - 56	18	44	17 - 63
Metabolic/Electrolyte Disorders	35	34	16 - 51	26	15	10 - 43
Pulmonary Disease	68	35	17 - 42	76	21	15 - 36
Renal Failure	7	14	5 - 70	25	24	7 - 60
Severe Acute Heart Disease	61	43	25 - 51	35	60	32 - 64
Severe Chronic Heart Disease	73	11	14 - 31	105	25	14 - 33
Severe Trauma	7	14	2 - 67	9	33	4 - 66
Gastrointestinal Disease	68	6	1 - 18	76	9	0 - 22
Gynecologic Disease	15	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	208	2	2 - 7	237	4	2 - 7
Musculoskeletal/Skin Conditions	93	1	0 - 9	99	2	0 - 12
Neuropsychiatric/Sensory Disease	76	4	0 - 22	96	4	0 - 19
Urologic Disease	35	3	0 - 76	44	9	0 - 58

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	483
Occupancy Rate (%):	73
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	222
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	68
Registered Nurses:	656
Licensed Practical Nurses:	149

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

HURLEY MEDICAL CENTER ONE HURLEY PLAZA, FLINT, MICHIGAN 48502 PHONE (313) 257-9000



Medicare Provider No. 230132

HURLEY MEDICAL CENTER

October 20, 1988

Comments on HCFA Mortality Data

Although HCFA made several refinements to their analytical methodologies this year each of their "range for predicted mortality" has only been adjusted for six patient characteristics available from 1987 paid claims data. The predictive model used still lacks specific clinical data regarding the severity of illness of individual patients, i.e., an assessment of those risk factors that are related to the patient's condition at the time of admission. In light of the fact that it has been well established that hospitals treating a large number of terminal or extremely acutely ill patients who tend to be admitted just prior to death will have higher than average crude mortality rates, the lack of adjustment for severity of illness remains a serious deficiency.

Hurley Medical Center is a 553 bed acute care referral hospital serving Flint, Michigan, and a three county area in mid-Michigan. The institution operates a number of highly specialized programs for the treatment of patients with terminal or critical conditions including cancer, acute kidney and heart disease, trauma and severe burns, as well as a regional unit for the treatment of head and neck injuries; geriatric and hospice services are also provided. Because of the nature and scope of these services, our patient population is more acutely ill than those admitted to the average community hospital, and are, therefore, at an increased risk of death at the time of admission. Given our particular patient population and the specialized services provided by the institution, it is significant to note that Hurley Medical Center's actual mortality rates for 1987 fell well within HCFA's "range for predicted mortality" rates overall and for all 16 diagnostic categories as they did in 1986.

Hurley Medical Center is committed to supporting a comprehensive Quality Assurance Program designed to objectively evaluate the outcome of patient care services rendered and to identify opportunities to further improve the quality of care delivered at our institution. As one aspect of this program, criteria-based mortality review is routinely conducted for patient deaths on all clinical services. Findings from

all quality assurance activities are utilized in review of hospital policies/procedures, physician performance via the reappointment process and in educational activities for staff at all levels. Members of Hurley Medical Center's medical and utilization review staffs concurrently evaluate the quality of patient care rendered to individual patients through the institution's Utilization Management Program.

Hurley Medical Center will review HCFA's 1987 mortality data along with ongoing information from its own Quality Assurance and Utilization Management Programs in an effort to further enhance the quality of health care services provided to patients in the community.

DY/bab:402

HURON MEMORIAL HOSPITAL

1100 SOUTH VAN DYKE ROAD
BAD AXE, MI 48413

Medicare Hospital Provider Number: 230118

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	626	10	8 - 14	627	10	8 - 14
Cancer	14	43	23 - 72	11	64	17 - 70
Cerebrovascular Accidents	14	43	9 - 58	21	38	10 - 51
Gastrointestinal Catastrophes	3	0	1 - 82	9	56	15 - 74
Infectious Disease	4	25	6 - 80	2	100	9 - 92
Metabolic/Electrolyte Disorders	11	18	18 - 67	9	22	5 - 62
Pulmonary Disease	35	17	11 - 39	38	21	13 - 41
Renal Failure	0	-	-	1	0	2 -100
Severe Acute Heart Disease	30	37	24 - 58	17	47	20 - 65
Severe Chronic Heart Disease	32	31	9 - 42	37	24	13 - 42
Severe Trauma	0	-	-	1	0	0 - 97
Gastrointestinal Disease	53	2	0 - 23	63	2	1 - 13
Gynecologic Disease	9	0	0 -100	9	11	0 -100
Low-Risk Heart Disease	57	5	1 - 20	61	2	1 - 12
Musculoskeletal/Skin Conditions	77	1	0 - 12	90	1	0 - 11
Neuropsychiatric/Sensory Disease	11	0	0 - 98	8	13	0 - 79
Urologic Disease	57	0	0 - 15	36	0	0 - 44

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	93
Occupancy Rate (%):	37
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	17
Percent of Physicians Who Are Board Certified Specialists:	82
Interns and Residents:	0
Registered Nurses:	45
Licensed Practical Nurses:	36

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HUTZEL HOSPITAL

4707 ST ANTOINE BLVD
DETROIT, MI 48201

Medicare Hospital Provider Number: 230076

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,382	12	10 - 15	1,633	10	10 - 15
Cancer	62	39	29 - 57	87	34	31 - 55
Cerebrovascular Accidents	41	15	15 - 39	44	18	15 - 39
Gastrointestinal Catastrophes	12	33	8 - 61	19	16	16 - 55
Infectious Disease	13	46	16 - 67	16	25	19 - 63
Metabolic/Electrolyte Disorders	33	24	19 - 53	35	17	13 - 44
Pulmonary Disease	35	34	13 - 45	40	20	14 - 41
Renal Failure	54	15	6 - 52	67	16	6 - 54
Severe Acute Heart Disease	38	42	27 - 59	34	50	25 - 59
Severe Chronic Heart Disease	42	19	12 - 37	62	15	13 - 32
Severe Trauma	0	-	-	1	100	1 - 97
Gastrointestinal Disease	76	7	0 - 19	89	4	1 - 13
Gynecologic Disease	25	0	0 -100	19	0	0 -100
Low-Risk Heart Disease	153	3	2 - 9	215	3	2 - 7
Musculoskeletal/Skin Conditions	65	2	0 - 13	125	2	1 - 8
Neuropsychiatric/Sensory Disease	24	4	0 - 59	32	9	1 - 32
Urologic Disease	82	1	0 - 11	67	3	0 - 25

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	372
Occupancy Rate (%):	79
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	629
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	14
Registered Nurses:	337
Licensed Practical Nurses:	71

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

INGHAM MEDICAL CENTER

401 W GREENLAWN AVENUE
LANSING , MI 48910

Medicare Hospital Provider Number: 230129

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,081	9	9 - 13	1,870	8	9 - 13
Cancer	58	24	26 - 52	56	21	25 - 51
Cerebrovascular Accidents	38	37	13 - 44	45	22	16 - 41
Gastrointestinal Catastrophes	16	31	11 - 58	16	25	16 - 60
Infectious Disease	20	25	15 - 55	26	31	13 - 51
Metabolic/Electrolyte Disorders	21	14	10 - 46	22	27	9 - 50
Pulmonary Disease	100	18	17 - 35	78	22	14 - 35
Renal Failure	6	17	4 - 74	7	29	6 - 75
Severe Acute Heart Disease	144	27	28 - 46	103	29	29 - 49
Severe Chronic Heart Disease	93	15	14 - 31	81	19	16 - 35
Severe Trauma	3	33	2 - 86	0	-	-
Gastrointestinal Disease	88	5	1 - 14	76	1	1 - 10
Gynecologic Disease	15	0	0 -100	11	9	0 -100
Low-Risk Heart Disease	417	5	2 - 7	425	3	2 - 5
Musculoskeletal/Skin Conditions	216	0	0 - 5	185	3	0 - 11
Neuropsychiatric/Sensory Disease	55	0	0 - 13	43	2	0 - 23
Urologic Disease	80	0	0 - 11	53	0	0 - 25

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	258
Occupancy Rate (%):	60
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	236
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	26
Registered Nurses:	339
Licensed Practical Nurses:	54

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

IONIA CO MEMORIAL HOSPITAL

479 LAFAYETTE ST
IONIA, MI 48846

Medicare Hospital Provider Number: 230027

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	399	16	12 - 20	388	12	10 - 17
Cancer	6	50	13 - 80	10	70	21 - 75
Cerebrovascular Accidents	24	25	14 - 49	16	31	9 - 54
Gastrointestinal Catastrophes	4	0	7 - 72	3	0	11 - 84
Infectious Disease	8	13	11 - 64	8	25	12 - 70
Metabolic/Electrolyte Disorders	9	44	13 - 72	5	0	2 - 68
Pulmonary Disease	47	17	14 - 38	36	11	11 - 36
Renal Failure	5	60	14 - 88	0	-	-
Severe Acute Heart Disease	24	42	23 - 62	17	41	22 - 66
Severe Chronic Heart Disease	32	25	12 - 43	27	15	10 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	26	0	0 - 40	41	5	0 - 31
Gynecologic Disease	5	20	0 -100	2	0	0 -100
Low-Risk Heart Disease	61	5	1 - 17	66	2	1 - 11
Musculoskeletal/Skin Conditions	17	6	0 - 98	27	4	0 - 45
Neuropsychiatric/Sensory Disease	3	0	0 -100	5	0	0 - 98
Urologic Disease	2	0	0 -100	5	0	0 - 86

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	77
Occupancy Rate (%):	27
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	16
Percent of Physicians Who Are Board Certified Specialists:	56
Interns and Residents:	0
Registered Nurses:	37
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

IRON COUNTY GENERAL HOSPITAL

1400 W ICE LAKE RD
IRON RIVER, MI 49935

Medicare Hospital Provider Number: 230149

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	319	9	11 - 18	301	14	11 - 20
Cancer	8	50	15 - 76	9	56	22 - 80
Cerebrovascular Accidents	19	21	13 - 50	15	33	9 - 56
Gastrointestinal Catastrophes	2	0	2 - 89	3	67	8 - 88
Infectious Disease	3	33	4 - 86	9	67	13 - 70
Metabolic/Electrolyte Disorders	9	11	4 - 57	9	0	4 - 47
Pulmonary Disease	20	20	10 - 47	25	20	14 - 47
Renal Failure	3	67	11 - 94	2	0	7 - 92
Severe Acute Heart Disease	19	32	20 - 61	15	60	19 - 66
Severe Chronic Heart Disease	26	12	14 - 41	22	14	10 - 42
Severe Trauma	1	0	3 - 99	0	-	-
Gastrointestinal Disease	35	0	0 - 20	25	0	0 - 28
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	45	2	1 - 18	37	0	1 - 15
Musculoskeletal/Skin Conditions	21	0	0 - 34	22	9	2 - 35
Neuropsychiatric/Sensory Disease	11	0	0 - 99	5	0	0 -100
Urologic Disease	4	0	0 -100	8	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	36
Occupancy Rate (%):	36
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	9
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	0
Registered Nurses:	19
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

KALKASKA MEMORIAL HEALTH CENTER

419 CORAL
KALKASKA, MI 49646

Medicare Hospital Provider Number: 230211

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	115	12	8 - 21	105	11	8 - 22
Cancer	0	-	-	2	100	7 - 90
Cerebrovascular Accidents	1	100	1 - 97	3	33	2 - 87
Gastrointestinal Catastrophes	1	100	0 - 97	0	-	-
Infectious Disease	0	-	-	2	50	7 - 96
Metabolic/Electrolyte Disorders	4	25	7 - 81	2	0	1 - 90
Pulmonary Disease	20	15	11 - 45	12	17	6 - 53
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	5	20	12 - 78	5	60	6 - 78
Severe Chronic Heart Disease	12	42	7 - 60	12	8	13 - 51
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	7	0	0 - 89	7	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	15	7	0 - 99	19	0	0 - 59
Musculoskeletal/Skin Conditions	8	0	0 -100	6	0	0 -100
Neuropsychiatric/Sensory Disease	2	0	0 -100	0	-	-
Urologic Disease	0	-	-	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	21
Occupancy Rate (%):	57
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	7
Percent of Physicians Who Are Board Certified Specialists:	86
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

KELSEY MEMORIAL HOSPITAL

418 WASHINGTON AVE
LAKEVIEW, MI 48850

Medicare Hospital Provider Number: 230155

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	192	12	7 - 17	214	16	7 - 18
Cancer	8	63	19 - 79	2	50	3 - 92
Cerebrovascular Accidents	6	50	3 - 74	11	36	9 - 63
Gastrointestinal Catastrophes	2	0	1 - 90	0	-	-
Infectious Disease	6	0	8 - 59	3	33	3 - 86
Metabolic/Electrolyte Disorders	0	-	-	4	25	1 - 82
Pulmonary Disease	13	23	6 - 54	26	35	9 - 47
Renal Failure	1	100	2 - 97	0	-	-
Severe Acute Heart Disease	6	33	11 - 77	9	11	16 - 64
Severe Chronic Heart Disease	8	50	3 - 69	8	38	3 - 67
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	19	0	0 - 52	36	3	0 - 25
Gynecologic Disease	6	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	31	0	1 - 18	20	20	0 - 93
Musculoskeletal/Skin Conditions	11	18	0 - 97	12	8	0 - 99
Neuropsychiatric/Sensory Disease	2	0	0 -100	1	0	0 -100
Urologic Disease	10	0	0 - 86	2	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	94
Occupancy Rate (%):	53
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	8
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	20
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

KENT COMMUNITY HOSPITAL

750 FULLER AVE N E
GRAND RAPIDS , MI 49503

Medicare Hospital Provider Number: 230276

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	71	0	0 - 21	51	0	0 - 40
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	0	-	-
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	0	-	-
Musculoskeletal/Skin Conditions	0	-	-	0	-	-
Neuropsychiatric/Sensory Disease	71	0	0 - 21	51	0	0 - 40
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	146
Ownership/Control:	Local Government

STAFFING

Interns and Residents:	0
Registered Nurses:	77
Licensed Practical Nurses:	35

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LAKE VIEW COMMUNITY HOSPITAL

408 HAZEN ST BOX 209
PAW PAW, MI 49079

Medicare Hospital Provider Number: 230172

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	388	11	9 - 16	407	9	9 - 16
Cancer	8	63	15 - 75	10	60	18 - 74
Cerebrovascular Accidents	11	45	10 - 64	9	22	17 - 70
Gastrointestinal Catastrophes	6	17	8 - 71	0	-	-
Infectious Disease	2	0	0 - 94	3	33	8 - 89
Metabolic/Electrolyte Disorders	5	60	2 - 79	9	0	7 - 48
Pulmonary Disease	34	18	14 - 43	35	9	13 - 36
Renal Failure	0	-	-	2	0	3 - 89
Severe Acute Heart Disease	14	29	21 - 67	13	54	19 - 70
Severe Chronic Heart Disease	24	29	10 - 47	26	23	9 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	36	3	0 - 44	42	2	1 - 18
Gynecologic Disease	13	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	27	0	1 - 20	26	4	0 - 48
Musculoskeletal/Skin Conditions	25	0	0 - 34	36	0	0 - 30
Neuropsychiatric/Sensory Disease	10	0	0 - 96	7	0	0 -100
Urologic Disease	25	0	0 - 32	25	0	0 - 64

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	174
Occupancy Rate (%):	87
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	25
Percent of Physicians Who Are Board Certified Specialists:	84
Interns and Residents:	0
Registered Nurses:	49
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LakeView
COMMUNITY HOSPITAL

P.O. Box 209 • 408 Hazen Street • Paw Paw, Michigan 49079-0209 • 616 657-3141

MEDICARE PROVIDER NUMBER: 23-0172

October 19, 1988

Health Standards and Quality Bureau
Health Care Financing Administration
Attn: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Blvd.
Baltimore, MD 21207

Dear Mrs. Kappert:

Lake View Community Hospital has extensively reviewed the statistics released by Health Care Financing Administration pertaining to institutional mortality rates. We have used an interdisciplinary approach in carefully scrutinizing the charts of each of the patients in question and concluded that our actual mortality rate is 11%, which is at the low end of the range of predicted mortality rates (9% to 16%). Upon reviewing each of the diagnostic categories individually, we have concluded that we are at the lower end of each individual category as well with three exceptions.

In the diagnostic categories of cancer, cerebrovascular accidents, and metabolic/electrolyte disturbances, we find that our mortality rate is at what we estimate to be the median or slightly above the median for the ranges in question. Although still well within the predicted range, we feel there are several reasons that may have contributed to our percentage in these three categories. First, we feel part of the reason for the increased mortality rate is due to the relatively small sample size (total cases 24 of 388). In addition, the average age of mortality in these categories is 75 which would increase the expectation of death due to the severe underlying illnesses which contributed to the death of these patients. Finally, of the thirteen deaths in these categories, eight patients had indicated that they did not wish extraordinary means to be used on their behalf. This may have further contributed to the higher rate in these diagnostic categories.

In some instances, the Health Care Financing Administration's use of the primary diagnosis to place the case in a diagnostic category for cause of death is misleading. For example: in one case the principal diagnosis was the reason for hospitalization, but the actual cause of death was the underlying comorbid condition and this is not reflected in the category in which it was listed.

Overall, we believe these statistics are continuing evidence that Lake View Community Hospital is successfully striving to improve the quality of care given to every patient. These statistics and the cases they represent will be used in our ongoing quality assurance program which includes mortality review, in an effort to ensure that we are doing everything we can to improve the quality of life for each and every patient we encounter.

Sincerely,

James R. Phillippe

James R. Phillippe
Administrator
Medicare Provider Number: 23-0172

JRP:ps

LAKESHORE COMM HOSP

72 S STATE ST
SHELBY, MI 49455

Medicare Hospital Provider Number: 230171

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	146	14	8 - 20	174	13	8 - 18
Cancer	3	33	2 - 87	4	75	10 - 83
Cerebrovascular Accidents	7	29	9 - 71	6	33	6 - 73
Gastrointestinal Catastrophes	2	0	0 - 94	4	50	7 - 83
Infectious Disease	4	50	4 - 82	1	0	0 - 98
Metabolic/Electrolyte Disorders	3	0	1 - 84	2	0	3 - 88
Pulmonary Disease	9	11	6 - 56	13	15	8 - 52
Renal Failure	0	-	-	7	71	13 - 80
Severe Acute Heart Disease	11	55	12 - 66	3	33	2 - 86
Severe Chronic Heart Disease	8	13	5 - 59	11	0	7 - 40
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	18	0	0 - 64	23	4	0 - 91
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	14	7	0 - 65	24	0	0 - 26
Musculoskeletal/Skin Conditions	13	0	0 - 84	15	0	0 - 71
Neuropsychiatric/Sensory Disease	3	0	0 -100	0	-	-
Urologic Disease	4	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	35
Occupancy Rate (%):	26
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	20
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	20
Licensed Practical Nurses:	9

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LANSING GENERAL HOSPITAL

2800 DEVONSHIRE
LANSING, MI 48909

Medicare Hospital Provider Number: 230167

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,186	15	10 - 15	1,215	13	10 - 15
Cancer	47	45	26 - 57	40	52	30 - 63
Cerebrovascular Accidents	58	38	15 - 41	41	29	16 - 45
Gastrointestinal Catastrophes	13	46	11 - 64	12	25	12 - 62
Infectious Disease	22	32	16 - 56	18	50	20 - 66
Metabolic/Electrolyte Disorders	16	31	6 - 54	20	30	13 - 55
Pulmonary Disease	66	26	16 - 40	69	16	16 - 37
Renal Failure	7	0	13 - 68	7	29	8 - 77
Severe Acute Heart Disease	49	49	25 - 54	49	53	27 - 56
Severe Chronic Heart Disease	47	28	10 - 37	47	32	12 - 40
Severe Trauma	3	0	3 - 79	5	40	5 - 78
Gastrointestinal Disease	86	3	1 - 12	88	7	0 - 20
Gynecologic Disease	9	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	183	4	1 - 8	194	3	2 - 8
Musculoskeletal/Skin Conditions	85	4	0 - 21	105	1	0 - 8
Neuropsychiatric/Sensory Disease	17	0	0 - 50	29	0	0 - 36
Urologic Disease	51	0	0 - 14	37	0	0 - 35

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	243
Occupancy Rate (%):	44
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	119
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	10
Registered Nurses:	177
Licensed Practical Nurses:	73

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Lansing General
Hospital

October 20, 1988

Health Standards and Quality Bureau
Attn: Mrs. Sandra Kappert
Health Care Financing Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

We appreciate the opportunity to comment on the 1987 mortality statistics provided to Lansing General Hospital (LGH) from the Health Care Financing Administration (HCFA).

While all of LGH's actual mortality rates fell within the range of HCFA's range for predicted mortality, the following initial findings are helpful for the public's understanding of this study and its limitations:

- There are several areas of concern regarding the list of LGH's "Hospital Characteristics". It should be clarified that the number of beds used in the Hospital Characteristics includes only Medical/Surgical beds, thereby excluding obstetrics, pediatric, and specialty care beds. This exclusion, along with the fact that there were 24 interns and residents at LGH in 1987, not zero, makes the staffing ratios listed a questionable figure. Additionally, the actual number of Medical/Surgical beds in 1987 at LGH was actually 170, not 114. Also, while no "Specialty Services" are listed for LGH, we have a twelve bed medical/surgical intensive care unit where care is provided to shock, trauma and coronary care patients.

- Our initial research of the mortality information indicated that 66% of the patients in the study were 75 years or older, with an average age of 78 years, a larger percentage rate and higher average age than the overall percentage rate for Michigan hospitals. This may be explained by the fact that physicians from this hospital staff five of the nine local extended care facilities. A preliminary evaluation of these cases referenced in these statistics reveal that this frail

Lansing General
Hospital, Osteopathic
2727 S. Pennsylvania
Lansing, MI. 48910-3490
(517)372-8220

elderly population were victims of advanced age and multiple debilitating disease conditions.

- As in the HCFA mortality rates for 1986, patients whose death occurred within 30 days of hospitalization, but outside the hospital, are included in the study. Although the use of a 30 days post-admission mortality rate may reduce apparent variations in mortality due to differences in length of stay, it can also result in the attribution to LGH of deaths unrelated to the condition being treated at the time of discharge or of deaths that resulted from management of the patient at home or in a post-acute care facility.

- The diagnostic category listing "Causes" - "All Cases" does not reflect the total number of Medicare admissions to LGH, but only the last patient admission for 1987. Patient "cases" identified by HCFA for LGH are 1,186; however, the total number of Medicare admissions in 1987 was 1,953. Based on the total number of 1987 Medicare admissions, LGH's mortality rate would drop from 15% to 9%.

- The elderly patient population electing not to receive life sustaining treatment has not been identified in the statistics; for example, those patients electing not to receive chemotherapy, resuscitation, medication, etc.

- The model used by HCFA still lacks severity of illness factors, which therefore severely limits the ability to predict the outcome of any individual patient. The predicted rates are nothing more than averages and cannot be used as an assessment tool for quality.

Thank you for the opportunity to respond to the mortality information prior to publication. We will continue to support activities designed to educate the public about health care and health care institutions.

Sincerely,

Robert E. Miller
President

REM/cm

LAPEER REGIONAL HOSPITAL

1375 N MAIN ST
LAPEER, MI 48446

Medicare Hospital Provider Number: 230193

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,040	15	10 - 16	1,067	13	10 - 15
Cancer	21	52	26 - 68	16	31	22 - 67
Cerebrovascular Accidents	44	30	14 - 42	25	32	14 - 50
Gastrointestinal Catastrophes	19	37	17 - 62	8	25	18 - 76
Infectious Disease	18	56	15 - 61	24	29	17 - 56
Metabolic/Electrolyte Disorders	11	36	2 - 63	13	23	4 - 55
Pulmonary Disease	47	21	12 - 38	60	23	14 - 38
Renal Failure	9	44	12 - 77	9	33	21 - 86
Severe Acute Heart Disease	62	48	26 - 52	72	43	29 - 53
Severe Chronic Heart Disease	70	39	14 - 38	45	36	13 - 42
Severe Trauma	1	0	0 - 99	3	33	1 - 88
Gastrointestinal Disease	83	6	1 - 15	73	3	1 - 13
Gynecologic Disease	11	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	181	2	1 - 6	158	3	2 - 8
Musculoskeletal/Skin Conditions	64	3	1 - 14	74	3	0 - 16
Neuropsychiatric/Sensory Disease	16	6	0 -100	42	0	0 - 16
Urologic Disease	50	0	0 - 30	48	0	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	184
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	77
Percent of Physicians Who Are Board Certified Specialists:	57
Interns and Residents:	0
Registered Nurses:	145
Licensed Practical Nurses:	41

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LAPEER REGIONAL HOSPITAL
Lapeer, Michigan

Comments on the 1987 H.C.F.A. Mortality Data
Provider #230193

DATA VERIFICATION

The data used by HCFA indicate a total of 137 of the 1,606 Medicare patients admitted to Lapeer Regional Hospital died within 30 days of admission. As was the case last year, our records do not match HCFA's.

Our data indicates that of the 137 deaths, 19 occurred outside of the hospital. It is impossible to determine the status of these patients as information concerning death after discharge is not included in the patients' medical record.

As with the '86 data, without detailed information concerning the diagnostic category selection process used by HCFA in computing the mortality rate, it is impossible to verify the accuracy of the data.

INTERPRETATIVE REMARKS

In only one of the diagnostic categories (severe chronic heart disease) did the hospital's actual mortality rate fall outside the predicted range. In that one category, HCFA data reveals a high borderline rate.

UNIQUE SERVICES RESULTING IN HIGHER THAN AVERAGE MORTALITY

In general, HCFA data supports the fact that our patient population is older than the state average. LRH's unique service is its position as the only hospital in our area serving people from the Thumb Region as well. We are responsible for providing a continuum of care from birth to death for all, regardless of prognosis.

RESULTS OF PRELIMINARY MEDICARE RECORD REVIEW

In reviewing the data, two factors should be noted. First, over half of the reported Medicare deaths were of the age range 75 or older. In addition, LRH has a standard NO CPR protocol that is followed when requested by patients/families in situations where patient survival is not expected. While statistics for No CPR have not been calculated for '87 patients, we would expect at least 25% of the deaths occurred under this protocol.

LEE MEMORIAL HOSPITAL

420 WEST HIGH STREET
DOWAGIAC, MI 49047

Medicare Hospital Provider Number: 230199

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	458	12	9 - 16	461	11	9 - 16
Cancer	10	40	13 - 69	15	53	28 - 76
Cerebrovascular Accidents	21	43	11 - 52	10	20	7 - 59
Gastrointestinal Catastrophes	4	0	15 - 78	2	50	1 - 92
Infectious Disease	5	20	8 - 76	5	40	6 - 78
Metabolic/Electrolyte Disorders	3	33	0 - 91	11	18	4 - 56
Pulmonary Disease	39	26	15 - 44	34	15	12 - 39
Renal Failure	2	50	5 - 94	1	100	1 -100
Severe Acute Heart Disease	9	56	10 - 69	14	21	19 - 62
Severe Chronic Heart Disease	28	11	15 - 40	34	24	13 - 42
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	52	2	1 - 15	52	4	0 - 23
Gynecologic Disease	7	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	55	4	1 - 18	60	3	0 - 17
Musculoskeletal/Skin Conditions	34	0	0 - 32	32	0	0 - 22
Neuropsychiatric/Sensory Disease	7	0	0 - 97	7	0	0 - 99
Urologic Disease	20	10	0 - 97	10	0	0 - 73

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	74
Occupancy Rate (%):	43
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	15
Percent of Physicians Who Are Board Certified Specialists:	47
Interns and Residents:	0
Registered Nurses:	44
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Lee Memorial Hospital
420 WEST HIGH STREET
DOWAGIAC, MI 49047
(616) 782-8681

Medicare Provider No. 230199

October 14, 1988

Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 -- D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

In reviewing the Medicare Hospital Mortality Information report for our Hospital we found several errors under the "Hospital Characteristics" section. Specifically we are licensed for 74 beds and had an occupancy rate of 47.3% rather than the 54 beds and 50% shown in the report. Also, under specialty services, we have a combined Intensive Care/Coronary care unit at the Hospital.

If you have any questions, please feel free to contact me.

Sincerely,

Roman Borszcz

Roman Borszcz
Administrator

RB:sm
kappert/hcfa

SPONSORED BY SISTERS OF ST. JOSEPH, NAZARETH, MICHIGAN

LEELANAU MEMORIAL HOSPITAL

SOUTH HIGH ST
NORTHPORT, MI 49670

Medicare Hospital Provider Number: 230107

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	155	12	5 - 16	131	10	7 - 18
Cancer	2	0	6 - 89	5	60	12 - 82
Cerebrovascular Accidents	5	40	6 - 77	2	0	2 - 88
Gastrointestinal Catastrophes	1	0	1 - 97	0	-	-
Infectious Disease	2	100	10 - 94	1	100	0 - 97
Metabolic/Electrolyte Disorders	2	100	5 - 89	1	0	0 -100
Pulmonary Disease	11	36	3 - 61	14	29	12 - 59
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	1	100	2 -100	5	20	14 - 80
Severe Chronic Heart Disease	3	33	1 - 89	5	40	1 - 82
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	18	6	0 - 96	17	0	0 - 97
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	25	8	0 - 66	12	0	0 - 91
Musculoskeletal/Skin Conditions	19	0	0 - 63	15	0	0 - 93
Neuropsychiatric/Sensory Disease	11	0	0 -100	7	0	0 -100
Urologic Disease	8	0	0 -100	8	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	87
Occupancy Rate (%):	74
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	36
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	15
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MACKINAC STRAITS HOSP HLTH CTR

220 BURDETTE ST
SAINT IGNACE, MI 49781

Medicare Hospital Provider Number: 230162

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	78	9	9 - 23	64	19	9 - 29
Cancer	1	100	0 - 99	3	100	12 - 84
Cerebrovascular Accidents	4	50	5 - 82	5	40	8 - 79
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	2	50	5 - 93	1	100	3 - 99
Metabolic/Electrolyte Disorders	0	-	-	2	0	0 - 99
Pulmonary Disease	12	8	7 - 47	9	11	2 - 57
Renal Failure	1	100	1 - 97	1	100	3 - 99
Severe Acute Heart Disease	6	17	16 - 76	5	40	9 - 80
Severe Chronic Heart Disease	1	0	0 - 99	2	0	2 - 88
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	4	0	0 - 97	2	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	11	0	0 - 89	7	0	0 - 98
Musculoskeletal/Skin Conditions	4	0	1 - 78	2	0	0 -100
Neuropsychiatric/Sensory Disease	4	0	0 -100	1	0	0 -100
Urologic Disease	1	0	0 -100	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	15
Occupancy Rate (%):	13
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	3
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MACOMB HOSPITAL CENTER

11800 EAST TWELVE MILE ROAD
WARREN, MI 48093

Medicare Hospital Provider Number: 230195

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,352	15	13 - 17	2,544	15	12 - 17
Cancer	129	42	32 - 54	139	43	32 - 53
Cerebrovascular Accidents	132	27	21 - 38	136	25	19 - 36
Gastrointestinal Catastrophes	24	42	19 - 61	34	32	20 - 55
Infectious Disease	40	27	22 - 54	36	36	25 - 59
Metabolic/Electrolyte Disorders	26	27	12 - 50	49	31	13 - 43
Pulmonary Disease	110	29	20 - 39	147	24	18 - 35
Renal Failure	20	55	20 - 74	13	8	13 - 65
Severe Acute Heart Disease	128	38	28 - 47	119	43	30 - 50
Severe Chronic Heart Disease	167	26	15 - 30	176	34	19 - 35
Severe Trauma	1	0	1 - 97	1	0	1 - 97
Gastrointestinal Disease	187	2	2 - 7	181	2	1 - 7
Gynecologic Disease	29	0	0 -100	32	3	0 -100
Low-Risk Heart Disease	337	4	2 - 7	447	5	2 - 6
Musculoskeletal/Skin Conditions	114	4	1 - 11	154	3	0 - 9
Neuropsychiatric/Sensory Disease	46	4	1 - 21	30	3	0 - 54
Urologic Disease	133	2	0 - 9	136	2	1 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	391
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	2
Registered Nurses:	231
Licensed Practical Nurses:	132

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MADISON COMMUNITY HOSPITAL

30671 STEPHENSON HIGHWAY
MADISON HEIGHTS, MI 48071

Medicare Hospital Provider Number: 230186

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	165	10	5 - 15	208	8	6 - 14
Cancer	4	75	11 - 84	2	50	4 - 93
Cerebrovascular Accidents	4	0	8 - 72	8	13	10 - 61
Gastrointestinal Catastrophes	2	50	1 - 92	1	0	0 - 98
Infectious Disease	0	-	-	2	0	1 - 91
Metabolic/Electrolyte Disorders	7	0	1 - 58	2	50	0 - 99
Pulmonary Disease	13	38	7 - 58	11	0	6 - 40
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	2	50	1 - 92	9	67	16 - 72
Severe Chronic Heart Disease	6	17	5 - 68	8	13	6 - 59
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	15	0	0 - 88	29	3	0 - 44
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	21	5	0 - 66	18	0	0 - 42
Musculoskeletal/Skin Conditions	10	0	0 -100	12	8	0 -100
Neuropsychiatric/Sensory Disease	28	0	0 - 56	16	0	0 -100
Urologic Disease	6	0	0 -100	20	0	0 - 92

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	27
Occupancy Rate (%):	62
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	24
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	0
Registered Nurses:	30
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MARLETTE COMMUNITY HOSPITAL

2770 MAIN STREET
MARLETTE, MI 48453

Medicare Hospital Provider Number: 230082

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	211	13	8 - 17	256	9	7 - 15
Cancer	2	50	7 - 96	4	25	15 - 88
Cerebrovascular Accidents	9	44	5 - 66	5	20	3 - 74
Gastrointestinal Catastrophes	2	0	2 - 88	2	50	1 - 94
Infectious Disease	2	0	2 - 89	0	-	-
Metabolic/Electrolyte Disorders	2	0	0 - 92	1	100	0 - 98
Pulmonary Disease	13	15	7 - 51	13	23	11 - 58
Renal Failure	2	50	1 - 94	0	-	-
Severe Acute Heart Disease	17	65	19 - 63	19	37	18 - 60
Severe Chronic Heart Disease	9	0	11 - 48	15	20	8 - 51
Severe Trauma	1	0	0 - 99	1	0	0 -100
Gastrointestinal Disease	19	11	0 - 98	32	0	0 - 21
Gynecologic Disease	3	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	36	3	1 - 22	43	5	0 - 27
Musculoskeletal/Skin Conditions	14	0	0 - 92	16	13	0 - 86
Neuropsychiatric/Sensory Disease	4	25	0 -100	4	0	0 -100
Urologic Disease	14	0	0 -100	10	10	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	81
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	10
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	22
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MARLETTE COMMUNITY HOSPITAL
2770 MAIN STREET
MARLETTE, MICHIGAN 48453
PHONE (517) 635-7491

October 20, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

Re: HCFA Mortality for 1987 - Marlette Community Hospital ID #23-0082

Dear Ms. Kappert:

Thank you for the opportunity to comment on the mortality study statistics.

It is noted that Marlette Community Hospital's overall mortality rate is again well within the predicted range.

This year, probably as a result of some significantly low numbers, there was one category (severe acute heart disease) that did fall slightly beyond the predicted mortality range.

We have reviewed all 11 deaths in that category and find the following.

1. Two (2) of these patients were transferred to other hospitals; one patient died on the same day as the transfer and another died 3 days later. We do not believe that these deaths should be attributed to MCH because their last admission was at another hospital.

2. Three (3) of these patients were transferred from our attached Extended Care Facility.

3. Of the 11 deaths, 6 had "Do Not Resuscitate" orders. Their conditions were complicated by multiple illnesses where eventual death was imminent.

4. The hospital does have a hospice program and does provide hospice care. A large percentage of these patients had terminal cancer.

5. In comparison with the HCFA statistics to our statistics, it was apparent that the average age of the individuals from our facility is higher than the State norms and, therefore, the "at risk of death" factor was greater.

Thank you for the opportunity to comment on these mortality statistics before they are released. I believe that once reading this response you will agree that if the cases for the "Do Not Resuscitate" orders were thrown out and the 2 cases that died in or after discharge from another tertiary care facilities, our statistics should reflect 3 out of 9, or 33%, which is well within the expected predicted mortality range.

Sincerely,

Darwin Root
Administrator

sm

c: Joyce Myotte, QA Coordinator
Judy Kell, President HCECM

MARQUETTE GENERAL HOSPITAL

420 WEST MAGNETIC STREET
MARQUETTE, MI 49855

Medicare Hospital Provider Number: 230054

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,249	11	10 - 14	2,032	10	11 - 15
Cancer	126	44	33 - 55	115	33	33 - 55
Cerebrovascular Accidents	58	34	15 - 40	83	25	17 - 37
Gastrointestinal Catastrophes	29	34	17 - 55	18	28	13 - 57
Infectious Disease	18	33	21 - 65	6	17	11 - 73
Metabolic/Electrolyte Disorders	17	18	14 - 54	19	11	17 - 51
Pulmonary Disease	83	25	18 - 39	52	23	16 - 41
Renal Failure	18	28	16 - 69	16	44	15 - 73
Severe Acute Heart Disease	65	38	24 - 49	60	35	24 - 50
Severe Chronic Heart Disease	93	17	17 - 34	78	17	19 - 37
Severe Trauma	10	10	6 - 55	9	33	5 - 66
Gastrointestinal Disease	136	4	1 - 10	123	3	2 - 10
Gynecologic Disease	24	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	311	3	3 - 7	315	5	2 - 8
Musculoskeletal/Skin Conditions	204	2	1 - 6	184	2	0 - 7
Neuropsychiatric/Sensory Disease	119	3	1 - 11	124	0	0 - 6
Urologic Disease	110	3	0 - 19	76	3	0 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	306
Occupancy Rate (%):	75
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	98
Percent of Physicians Who Are Board Certified Specialists:	98
Interns and Residents:	15
Registered Nurses:	182
Licensed Practical Nurses:	78

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MCKENZIE MEMORIAL HOSPITAL

120 DELAWARE STREET
SANDUSKY, MI 48471

Medicare Hospital Provider Number: 230253

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	256	15	8 - 17	314	15	9 - 18
Cancer	7	57	9 - 74	7	71	20 - 81
Cerebrovascular Accidents	5	20	5 - 74	8	13	10 - 62
Gastrointestinal Catastrophes	2	50	1 - 93	3	67	4 - 86
Infectious Disease	1	0	1 - 97	2	50	2 - 92
Metabolic/Electrolyte Disorders	6	33	3 - 74	2	0	0 - 96
Pulmonary Disease	20	5	10 - 37	19	5	12 - 40
Renal Failure	0	-	-	1	0	1 - 97
Severe Acute Heart Disease	11	55	12 - 66	17	65	24 - 68
Severe Chronic Heart Disease	32	38	10 - 44	38	21	12 - 39
Severe Trauma	0	-	-	1	100	0 - 98
Gastrointestinal Disease	30	7	0 - 59	31	6	0 - 54
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	30	3	0 - 28	42	0	0 - 15
Musculoskeletal/Skin Conditions	16	0	0 - 75	11	0	0 - 91
Neuropsychiatric/Sensory Disease	3	0	0 -100	7	14	0 -100
Urologic Disease	9	0	0 -100	23	13	0 - 88

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	38
Occupancy Rate (%):	26
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	14
Percent of Physicians Who Are Board Certified Specialists:	43
Interns and Residents:	0
Registered Nurses:	21
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MCLAREN GEN HOSP

401 BALLENGER HWY
FLINT, MI 48502

Medicare Hospital Provider Number: 230141

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,688	11	10 - 14	2,706	10	9 - 13
Cancer	72	33	31 - 56	83	42	30 - 55
Cerebrovascular Accidents	106	25	20 - 38	86	22	19 - 38
Gastrointestinal Catastrophes	30	30	20 - 57	23	39	17 - 59
Infectious Disease	19	32	18 - 60	31	26	21 - 56
Metabolic/Electrolyte Disorders	56	30	20 - 49	47	23	11 - 41
Pulmonary Disease	106	25	16 - 36	107	24	15 - 35
Renal Failure	10	40	17 - 80	5	20	6 - 79
Severe Acute Heart Disease	101	32	28 - 48	106	40	29 - 50
Severe Chronic Heart Disease	126	29	15 - 32	141	18	17 - 32
Severe Trauma	6	50	11 - 79	3	33	1 - 89
Gastrointestinal Disease	183	2	2 - 7	200	3	1 - 8
Gynecologic Disease	26	0	0 -100	19	0	0 -100
Low-Risk Heart Disease	510	4	2 - 6	485	3	2 - 6
Musculoskeletal/Skin Conditions	262	2	1 - 6	254	2	1 - 6
Neuropsychiatric/Sensory Disease	64	0	0 - 10	70	4	0 - 26
Urologic Disease	139	2	0 - 11	135	2	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	362
Occupancy Rate (%):	79
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	225
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	41
Registered Nurses:	383
Licensed Practical Nurses:	142

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MCPHERSON COMMUNITY HLTH CTR

620 BYRON RD
HOWELL, MI 48843

Medicare Hospital Provider Number: 230069

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	726	15	9 - 16	817	12	9 - 14
Cancer	11	27	17 - 68	17	47	26 - 72
Cerebrovascular Accidents	31	32	12 - 45	23	22	12 - 47
Gastrointestinal Catastrophes	6	33	14 - 80	5	80	16 - 83
Infectious Disease	9	33	9 - 67	6	0	10 - 61
Metabolic/Electrolyte Disorders	8	75	11 - 69	15	7	5 - 43
Pulmonary Disease	44	23	14 - 41	49	16	14 - 38
Renal Failure	7	71	20 - 87	3	0	7 - 83
Severe Acute Heart Disease	27	44	24 - 61	30	47	24 - 59
Severe Chronic Heart Disease	43	33	12 - 41	50	24	11 - 36
Severe Trauma	0	-	-	1	0	0 - 98
Gastrointestinal Disease	51	6	1 - 21	65	8	0 - 28
Gynecologic Disease	9	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	92	3	1 - 11	109	6	1 - 12
Musculoskeletal/Skin Conditions	56	2	0 - 15	66	3	0 - 21
Neuropsychiatric/Sensory Disease	22	0	0 - 69	24	4	0 - 93
Urologic Disease	35	3	0 - 28	37	0	0 - 24

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	127
Occupancy Rate (%):	47
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	51
Percent of Physicians Who Are Board Certified Specialists:	53
Interns and Residents:	0
Registered Nurses:	99
Licensed Practical Nurses:	28

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

McPherson Hospital

Livingston County's Full Service Hospital

Peter J. Schonfeld
President &
Chief Executive Officer

October 10, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: RESPONSE TO HCFA MORTALITY DATA - McPHERSON HOSPITAL

Attached are corrections to the "Medicare Hospital Mortality Information" and "Hospital Characteristics" we received from you in Dr. Roper's letter of September 15, 1988. We have verified the mortality information to the extent possible, given that many of the deaths occurred after discharge from our facility and we are unable to replicate that data.

With respect to the Hospital Characteristics, please note that we are a 127-bed facility with a 43.9 percentage of occupancy for 1987. We have 47 active and associate members of our Medical Staff, 25 of whom are Board Certified. At the end of 1987, we had 1.11 Registered Nurses and 0.34 Licensed Practical Nurses, respectively, per bed.

We are pleased that, with one exception, our actual mortality rates fell within the predicted ranges for each diagnostic category. Based on the premise that an actual mortality rate outside the predicted range may indicate differences in the kinds of patients treated, we have conducted an analysis of that exception, i.e., Metabolic and Electrolyte Disturbances.

There were a total of eight (8) cases in this category, with six (6) deaths recorded within 30 days of admission. Five (5) of these patients expired after discharge and were medically stable at the time they left the hospital. We compared patient characteristics for this category to other Michigan hospitals. Interestingly, 55% of the patients admitted to McPherson Hospital for Metabolic and Electrolyte Disturbances were 80 years of age or older, compared to 40% throughout the rest of the state. We also found that 89% of our patients had at least one comorbid condition, compared to 59% at other hospitals.
One must also recognize that, because of the small number of cases, each death rather dramatically affects the overall mortality rate.

We are encouraged that HCFA has responded to hospitals' concerns regarding adjustments for severity of illness by initial development of the Medicare Mortality Predictor System. Time constraints have not permitted us to implement the system and report on its findings at the time of this writing, however we are anxious to incorporate it in our ongoing Quality Assurance efforts.

We continue to acknowledge the usefulness of mortality data as <u>one</u> indicator of the quality of care provided at McPherson Hospital. Many other variables must be assessed to continually improve the quality of our care and these are accomplished within the context of our Quality Assurance Program. We will continue to use the HCFA data as an additional monitoring activity within that Program.

Thank you for the opportunity to comment.

Sincerely,

Peter J. Schonfeld
President & CEO

PJS/MBJ/gd

Attachment

MECOSTA COUNTY GENERAL HOSP

405 WINTER
BIG RAPIDS, MI 49307

Medicare Hospital Provider Number: 230093

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	537	12	10 - 16	529	12	9 - 16
Cancer	10	60	23 - 78	17	53	22 - 68
Cerebrovascular Accidents	18	6	14 - 43	19	16	11 - 47
Gastrointestinal Catastrophes	5	40	8 - 79	8	38	14 - 75
Infectious Disease	3	33	2 - 87	6	17	12 - 73
Metabolic/Electrolyte Disorders	2	50	1 - 92	4	25	0 - 89
Pulmonary Disease	44	23	18 - 45	29	17	12 - 42
Renal Failure	4	75	12 - 88	2	50	5 - 94
Severe Acute Heart Disease	31	32	22 - 55	23	39	20 - 59
Severe Chronic Heart Disease	39	23	10 - 38	39	23	11 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	46	2	0 - 18	55	2	1 - 14
Gynecologic Disease	3	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	72	4	1 - 15	59	3	1 - 15
Musculoskeletal/Skin Conditions	55	2	0 - 16	54	2	0 - 20
Neuropsychiatric/Sensory Disease	10	0	0 - 89	5	0	0 -100
Urologic Disease	7	0	0 -100	26	0	0 - 79

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	74
Occupancy Rate (%):	39
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	20
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	59
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MEMORIAL HOSPITAL

826 WEST KING STREET
OWOSSO, MI 48867

Medicare Hospital Provider Number: 230121

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,060	14	10 - 15	1,040	13	9 - 14
Cancer	25	64	25 - 64	35	46	26 - 61
Cerebrovascular Accidents	47	34	13 - 41	45	22	16 - 42
Gastrointestinal Catastrophes	10	10	11 - 58	9	44	6 - 67
Infectious Disease	14	21	13 - 58	7	29	10 - 72
Metabolic/Electrolyte Disorders	13	31	8 - 59	15	33	4 - 55
Pulmonary Disease	64	13	17 - 37	71	32	13 - 37
Renal Failure	7	71	19 - 85	3	67	3 - 87
Severe Acute Heart Disease	60	40	25 - 52	36	50	24 - 57
Severe Chronic Heart Disease	70	21	14 - 35	62	21	13 - 35
Severe Trauma	0	-	-	2	0	0 - 93
Gastrointestinal Disease	81	5	0 - 17	109	3	1 - 10
Gynecologic Disease	15	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	117	4	1 - 11	125	2	1 - 8
Musculoskeletal/Skin Conditions	80	2	0 - 14	56	5	0 - 46
Neuropsychiatric/Sensory Disease	15	0	0 - 99	27	4	0 - 89
Urologic Disease	53	4	0 - 47	32	0	0 - 60

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	157
Occupancy Rate (%):	57
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	55
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	129
Licensed Practical Nurses:	24

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

THE MEMORIAL HOSPITAL

826 WEST KING STREET • OWOSSO, MICHIGAN 48867

October 21, 1988

Attn: Sandra Kappert
Health Care Financing Administration
Health Standards & Quality Bureau
Meadows East Building 2-D-2
6325 Security Blvd.
Baltimore, Maryland 21207

RE: Corrections/Additions HCFA Mortality Data

Dear Ms. Kappert;

Subsequent to receipt of HCFA Mortality Data for our institution, we are writing to request the following corrections and analysis be included.

With respect to our institutional data, the following corrections should be made:

BEDS: 184
OCCUPANCY RATE: 51.5%
ICU/CCU: YES
TOTAL PHYSICIANS: 129
70 Active
24 Courtesy
35 Consulting

This institution does operate a hospital based hospice and home health care program.

An analysis of data which your office provided contrasted with our research indicates that out of 122 patient deaths listed, 94 patients were no-code status. Furthermore, 2 patients had been previously discharged from our facility and admitted to Ingham Medical Center in Lansing, Michigan.

PHONE (517) 723-5211

Finally, it should be noted that out of 122 patients, 102 individuals had 4 or more high risk and low risk initial complications.

I would ask that this information be assimilated into our institutional profile to more correctly reflect our relative status.

Very Truly Yours,

James Randall Johnson
General Counsel

JRJ:jd

MEMORIAL MEDICAL CTR OF WEST MICH

1 ATKINSON DR
LUDINGTON, MI 49431

Medicare Hospital Provider Number: 230110

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	851	10	9 - 14	799	11	10 - 15
Cancer	17	41	21 - 67	23	57	26 - 66
Cerebrovascular Accidents	33	24	14 - 44	32	31	14 - 46
Gastrointestinal Catastrophes	9	0	12 - 52	5	60	8 - 79
Infectious Disease	8	13	13 - 66	6	50	12 - 80
Metabolic/Electrolyte Disorders	6	17	11 - 73	4	25	2 - 82
Pulmonary Disease	39	18	16 - 42	50	12	13 - 35
Renal Failure	3	33	4 - 88	0	-	-
Severe Acute Heart Disease	38	39	23 - 55	49	43	27 - 55
Severe Chronic Heart Disease	59	20	15 - 36	45	20	13 - 38
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	82	5	1 - 15	64	0	0 - 9
Gynecologic Disease	18	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	89	2	1 - 10	70	4	1 - 15
Musculoskeletal/Skin Conditions	89	2	0 - 20	99	2	1 - 10
Neuropsychiatric/Sensory Disease	22	0	0 - 62	18	0	0 - 56
Urologic Disease	34	3	0 - 42	35	0	0 - 53

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	79
Occupancy Rate (%):	58
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	34
Percent of Physicians Who Are Board Certified Specialists:	88
Interns and Residents:	0
Registered Nurses:	48
Licensed Practical Nurses:	43

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MERCY HOSPITAL

1500 E SHERMAN BOULEVARD
MUSKEGON, MI 49443

Medicare Hospital Provider Number: 230004

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,859	11	9 - 13	1,968	11	10 - 14
Cancer	64	36	27 - 54	55	33	31 - 59
Cerebrovascular Accidents	63	32	17 - 41	74	23	17 - 38
Gastrointestinal Catastrophes	14	50	14 - 65	9	33	11 - 69
Infectious Disease	26	31	19 - 56	36	31	20 - 54
Metabolic/Electrolyte Disorders	17	24	7 - 51	38	13	7 - 36
Pulmonary Disease	67	31	15 - 40	76	25	14 - 36
Renal Failure	30	23	10 - 59	33	21	15 - 64
Severe Acute Heart Disease	84	26	24 - 45	98	33	27 - 47
Severe Chronic Heart Disease	78	15	14 - 32	93	33	13 - 34
Severe Trauma	1	0	0 - 98	4	25	4 - 80
Gastrointestinal Disease	117	3	0 - 11	140	1	1 - 7
Gynecologic Disease	16	0	0 -100	12	8	0 -100
Low-Risk Heart Disease	262	5	1 - 8	265	4	2 - 7
Musculoskeletal/Skin Conditions	207	1	1 - 6	201	1	1 - 6
Neuropsychiatric/Sensory Disease	51	4	0 - 23	66	5	0 - 25
Urologic Disease	87	1	0 - 10	76	0	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	268
Occupancy Rate (%):	55
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	143
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MERCY HOSPITAL

2601 ELECTRIC AVENUE
PORT HURON, MI 48060

Medicare Hospital Provider Number: 230031

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,184	12	10 - 15	1,097	12	9 - 15
Cancer	63	57	30 - 57	43	58	28 - 59
Cerebrovascular Accidents	48	33	17 - 45	26	12	14 - 42
Gastrointestinal Catastrophes	10	30	15 - 69	7	14	5 - 65
Infectious Disease	13	54	19 - 70	14	14	17 - 59
Metabolic/Electrolyte Disorders	27	30	17 - 54	23	61	21 - 62
Pulmonary Disease	50	22	14 - 39	53	28	17 - 43
Renal Failure	4	25	9 - 85	4	50	11 - 89
Severe Acute Heart Disease	31	39	28 - 63	29	31	22 - 56
Severe Chronic Heart Disease	44	25	10 - 37	54	33	13 - 39
Severe Trauma	0	-	-	2	0	4 - 89
Gastrointestinal Disease	59	5	0 - 23	63	3	1 - 16
Gynecologic Disease	3	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	237	2	1 - 6	235	1	2 - 6
Musculoskeletal/Skin Conditions	91	1	2 - 9	106	1	0 - 8
Neuropsychiatric/Sensory Disease	24	4	0 - 57	21	0	0 - 97
Urologic Disease	50	0	0 - 13	58	2	0 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	119
Occupancy Rate (%):	57
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	110
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	93
Licensed Practical Nurses:	18

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Mercy Hospital
2601 Electric Avenue·Port Huron, Michigan 48061-1348 (313)985·1500

Medicare Provider #230031

October 20, 1988

William L. Roper, M.D., Administrator
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

Although the mortality rates for Mercy Hospital are within the predicted ranges, we feel it is important to comment on the programs and characteristics of Mercy Hospital that impact these data.

Mercy Hospital is a regional referral center for Oncology, Cardiology, and Vascular Surgery. We serve patients from a large geographic area (Thumb Area). Mercy Hospital has an Oncology Program that specializes in the treatment of the terminally ill. Twenty-eight percent (28%) of our oncology deaths happened outside the hospital, at home or in a nursing home. The majority of cancer deaths, whether in or out of the hospital, were with NO CODE patients. With NO CODE patients, the patient and/or family request a peaceful death without heroic measures.

We reviewed the Cerebrovascular Accident (CVA) mortality group and found that half of the hospital mortalities presented to our Emergency Room in a comatose state. Approximately one third of our total CVA mortalities happened outside the hospital.

Small denominators can account for wide fluctuations in data and many of the categories for Mercy Hospital had small numbers of patients. One category in particular, Gastrointestinal Catastrophy, may have an error. Our records show five more patients in this category which reduces the mortality rate from 30% to 20%. Specifics on these patients are attached to this letter. There were a few errors in Hospital Characteristics and these changes are also attached to this letter.

In summary, Mercy Hospital has a comprehensive Quality Assurance Program which measures many aspects of patient care quality. Mortality data are used in combination with other measures to evaluate and manage quality care.

Sincerely yours,

Robert Beyer
President and CEO

James W. Copping, M.D.
Chief of Staff

RB/JWC/cms
9/32

Encl.
9/32

MERCY HOSPITAL

1100 MICHIGAN AVE
GRAYLING, MI 49738

Medicare Hospital Provider Number: 230058

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	807	13	9 - 15	837	10	10 - 16
Cancer	9	89	30 - 78	10	50	24 - 80
Cerebrovascular Accidents	23	22	14 - 49	25	32	12 - 49
Gastrointestinal Catastrophes	10	20	14 - 66	10	30	14 - 69
Infectious Disease	10	20	13 - 64	12	50	11 - 65
Metabolic/Electrolyte Disorders	8	25	7 - 67	14	14	12 - 55
Pulmonary Disease	63	27	15 - 39	69	25	16 - 39
Renal Failure	4	25	2 - 83	1	0	3 - 98
Severe Acute Heart Disease	28	50	22 - 59	47	28	25 - 52
Severe Chronic Heart Disease	45	13	14 - 36	53	17	12 - 34
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	66	0	1 - 9	72	3	1 - 14
Gynecologic Disease	11	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	124	6	1 - 12	84	4	1 - 12
Musculoskeletal/Skin Conditions	72	3	1 - 13	85	1	0 - 10
Neuropsychiatric/Sensory Disease	21	5	0 - 73	18	0	1 - 27
Urologic Disease	8	0	0 - 99	12	8	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	130
Occupancy Rate (%):	59
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	25
Percent of Physicians Who Are Board Certified Specialists:	60
Interns and Residents:	0
Registered Nurses:	45
Licensed Practical Nurses:	32

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MERCY HOSPITAL

400 HOBART
CADILLAC, MI 49601

Medicare Hospital Provider Number: 230081

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,271	11	9 - 14	1,313	13	9 - 14
Cancer	37	49	31 - 65	39	62	31 - 64
Cerebrovascular Accidents	32	47	13 - 48	33	27	13 - 44
Gastrointestinal Catastrophes	8	50	13 - 75	9	44	10 - 69
Infectious Disease	7	43	8 - 73	0	-	-
Metabolic/Electrolyte Disorders	19	21	8 - 49	8	38	9 - 70
Pulmonary Disease	79	15	15 - 34	75	31	15 - 39
Renal Failure	9	33	8 - 72	8	25	10 - 75
Severe Acute Heart Disease	46	39	24 - 53	56	57	25 - 52
Severe Chronic Heart Disease	75	19	14 - 33	81	27	15 - 36
Severe Trauma	3	0	9 - 82	2	0	2 - 89
Gastrointestinal Disease	120	2	1 - 8	129	3	1 - 9
Gynecologic Disease	22	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	167	4	1 - 9	164	2	2 - 7
Musculoskeletal/Skin Conditions	97	1	0 - 9	141	3	1 - 9
Neuropsychiatric/Sensory Disease	64	3	0 - 30	61	7	0 - 39
Urologic Disease	76	1	0 - 15	79	1	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	174
Occupancy Rate (%):	58
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	38
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	95
Licensed Practical Nurses:	86

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MERCY MEMORIAL MEDICAL CENTER INC

1234 NAPIER AVENUE
ST JOSEPH , MI 49085

Medicare Hospital Provider Number: 230021

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,254	12	10 - 15	2,272	13	11 - 15
Cancer	71	52	31 - 58	89	47	32 - 57
Cerebrovascular Accidents	102	26	16 - 34	87	38	18 - 40
Gastrointestinal Catastrophes	27	30	15 - 53	17	35	16 - 62
Infectious Disease	23	30	16 - 55	26	31	17 - 55
Metabolic/Electrolyte Disorders	35	29	12 - 46	35	3	12 - 35
Pulmonary Disease	126	21	15 - 33	131	23	17 - 35
Renal Failure	31	13	14 - 60	11	36	12 - 74
Severe Acute Heart Disease	74	42	28 - 52	115	44	28 - 48
Severe Chronic Heart Disease	158	28	15 - 31	155	17	16 - 30
Severe Trauma	5	40	5 - 78	0	-	-
Gastrointestinal Disease	148	3	2 - 9	166	3	1 - 8
Gynecologic Disease	19	0	0 - 95	21	0	0 -100
Low-Risk Heart Disease	292	5	1 - 7	283	2	2 - 6
Musculoskeletal/Skin Conditions	189	2	1 - 7	157	1	1 - 7
Neuropsychiatric/Sensory Disease	51	2	0 - 19	55	4	0 - 25
Urologic Disease	98	0	0 - 7	72	3	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	302
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	300
Licensed Practical Nurses:	47

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MERCY-MEMORIAL HOSPITAL

740 N MACOMB STREET, PO BOX 67
MONROE, MI 48161

Medicare Hospital Provider Number: 230099

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,443	13	10 - 15	1,446	13	10 - 15
Cancer	37	51	28 - 62	40	50	24 - 57
Cerebrovascular Accidents	57	32	16 - 41	69	30	17 - 40
Gastrointestinal Catastrophes	17	24	16 - 59	14	21	15 - 60
Infectious Disease	12	25	16 - 65	11	27	11 - 64
Metabolic/Electrolyte Disorders	28	11	7 - 38	18	6	7 - 40
Pulmonary Disease	101	26	18 - 38	119	18	17 - 35
Renal Failure	9	56	12 - 77	3	67	9 - 91
Severe Acute Heart Disease	46	37	25 - 54	63	44	28 - 54
Severe Chronic Heart Disease	106	24	15 - 32	85	22	16 - 35
Severe Trauma	2	50	1 - 93	2	0	1 - 90
Gastrointestinal Disease	106	8	0 - 19	101	6	1 - 14
Gynecologic Disease	12	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	243	3	1 - 7	224	0	2 - 5
Musculoskeletal/Skin Conditions	113	2	0 - 9	91	3	0 - 15
Neuropsychiatric/Sensory Disease	36	6	1 - 25	34	0	0 - 22
Urologic Disease	70	0	0 - 9	76	8	0 - 33

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	180
Occupancy Rate (%):	70
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	63
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	170
Licensed Practical Nurses:	53

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Mercy Memorial Hospital
740 North Macomb Street
P.O. Box 67
Monroe, Michigan 48161
313-241-1700

Medicare Provider # 230099

October 20, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert,

Please find herein our comments regarding the publication entitled Medicare Hospital Mortality Information (1987).

First, we have identified two discrepancies in the data provided to our organization. Both errors involved patients who were subsequently admitted to other hospitals in 1987. Since these patients' last admissions were in other institutions, we understand they should not have been included in our statistics. The effects of these changes are: (1) the cancer category would be reduced by one death with the actual mortality rate decreasing to 50%; (2) the low-risk heart disease category would decrease by one death with the actual mortality rate remaining at 3%; and, (3) the actual mortality rate for all causes would be unchanged.

Second, we would like to stress, as you have, that mortality information is not a complete indicator of quality care. Mortality is only one statistic considered as part of the quality assurance process. Even though Mercy Memorial's data falls within the predicted mortality ranges, we cannot utilize this information alone to draw conclusions about our care. We find the statistics lack severity-of-illness and other important patient characteristic adjustments and that the data is collected from a basically elderly population. Also, the sampling technique results in including deaths in the database in which the cause of death is unrelated to a patient's last admission. We believe these limitations in the statistical methodology skew the data and do not allow it to be generalized to our patient population as a whole. Due to these limitations, we can only use this information to assist us in focusing our quality assurance activity.

At Mercy Memorial, the medical staff and each clinical department have a quality assurance mechanism in place to assess the quality and appropriateness of the care provided. With the mortality statistics discussed here, other external data, and information from our own quality assurance program, we will continue to assess and improve the services we offer in order to provide quality care to our community.

Sincerely,

Pat Curtis

Pat Curtis
Quality Assurance/
Risk Management Director

METROPOLITAN HOSPITAL

1800 TUXEDO AVENUE
DETROIT, MI 48206

Medicare Hospital Provider Number: 230011

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	91	11	6 - 20	444	12	8 - 15
Cancer	1	100	1 - 97	10	50	19 - 75
Cerebrovascular Accidents	5	20	4 - 74	15	33	8 - 55
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	1	100	3 - 98
Metabolic/Electrolyte Disorders	2	0	6 - 90	8	38	7 - 69
Pulmonary Disease	5	40	4 - 77	20	35	11 - 53
Renal Failure	0	-	-	1	0	0 - 99
Severe Acute Heart Disease	8	25	13 - 70	22	27	19 - 57
Severe Chronic Heart Disease	5	40	3 - 77	32	22	11 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	7	0	0 - 84	48	4	0 - 30
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	19	0	0 - 76	77	1	1 - 10
Musculoskeletal/Skin Conditions	5	0	0 -100	26	4	0 - 89
Neuropsychiatric/Sensory Disease	3	33	0 -100	12	0	0 - 99
Urologic Disease	2	0	0 -100	31	3	0 - 91

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	44
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	98
Licensed Practical Nurses:	28

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

METROPOLITIAN HOSPITALIC HOSPITAL

1919 BOSTON S E
GRAND RAPIDS, MI 49506

Medicare Hospital Provider Number: 230236

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,651	13	9 - 14	1,656	12	9 - 14
Cancer	59	49	28 - 56	51	37	29 - 58
Cerebrovascular Accidents	81	20	17 - 36	76	20	17 - 36
Gastrointestinal Catastrophes	16	25	23 - 67	9	44	10 - 70
Infectious Disease	13	46	12 - 64	15	20	17 - 60
Metabolic/Electrolyte Disorders	21	38	6 - 51	17	18	8 - 50
Pulmonary Disease	104	25	15 - 35	91	25	15 - 36
Renal Failure	7	29	7 - 75	7	57	12 - 81
Severe Acute Heart Disease	64	38	28 - 53	42	52	25 - 56
Severe Chronic Heart Disease	66	17	11 - 31	77	26	16 - 37
Severe Trauma	2	0	2 - 89	3	67	2 - 87
Gastrointestinal Disease	118	4	1 - 11	123	5	1 - 11
Gynecologic Disease	21	0	0 -100	25	0	0 -100
Low-Risk Heart Disease	136	7	1 - 13	134	4	1 - 10
Musculoskeletal/Skin Conditions	195	5	0 - 10	223	3	1 - 7
Neuropsychiatric/Sensory Disease	65	5	0 - 33	69	1	0 - 16
Urologic Disease	123	3	0 - 21	127	2	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	224
Occupancy Rate (%):	61
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	101
Percent of Physicians Who Are Board Certified Specialists:	46
Interns and Residents:	25
Registered Nurses:	203
Licensed Practical Nurses:	83

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

METROPOLITAN HOSPITAL
1919 BOSTON, S.E.
GRAND RAPIDS, MICHIGAN 49506
(616) 247-7200

October 20, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
Baltimore, Maryland 21207

Dear Mrs. Kappert: RE: Hospital ID #230236

Thank you for allowing us the opportunity again this year to review the selected mortality information for Medicare patients treated at our institution in 1987. We have taken this opportunity to evaluate the information you have shared with us, and provide the following comments to put this information into perspective.

HOSPITAL CHARACTERISTICS - Metropolitan Hospital is a community osteopathic teaching institution consisting of 164 medical-surgical beds in 1987. The Medical Staff consists of 177 members; fifty-six percent (56%) are board certified, and twenty-two (22%) are board eligible. Metropolitan's current Case Mix Index (CMI) is 1.239, a comparative statistic published by HCFA. This statistic means that twenty-four (24%) of the mix of Medicare patients treated at Metropolitan Hospital are more complex in nature as compared to the national average. This is due to the number of patient referrals from other communities.

MORTALITY DATA VERIFICATION - Of the 215 Medicare deaths within 30 days of admission, as indicated by HCFA, we discovered 8 cases that were discharged alive, and in fact, were alive 30 days after admission. We encountered some difficulty in our attempt to verify data on other patients whose death occurred after discharge. The attending physician is the most appropriate source of information, however, many times this source did not have the necessary information. Therefore, there were several deaths that occurred after their last hospitalization at Metropolitan that could not be verified.

MORTALITY RATE ANALYSIS BY HCFA - Severity of illness must be taken into consideration when evaluating the mortality information reported by HCFA. The mortality information alone cannot be used as an indicator of the quality of patient care provided at any given hospital. In performing our analysis of the data, we found that those deaths that occurred within 30 days of admission had a significant number of co-morbidities and/or complications (3 or more). Also, a significant portion were found to be in poor condition on admission with a poor prognosis.

The preliminary results reflect an overall actual mortality rate of 13%, compared to the range for predicted mortality of 9-14%. We are confident that our overall rate will fall closer to the median once the figures are adjusted to reflect the corrected number of deaths within 30 days of admission.

In the diagnostic category of Infectious Disease, there is a significant increase in the mortality rate. Significant characteristics which could contribute to death for this category of patient were: an average age of 81 years; 50% of these patients had length of stays that were 24 hours or less, all cases had multiple co-morbidities and/or complications, and 50% of the cases had a poor prognosis, or it was the families' request to limit treatment. A specialist evaluated and/or treated 80% of these patients.

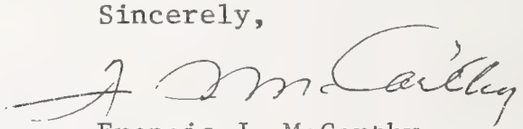
The other diagnostic category with a significant increase in mortality rate from 1986 was Metabolic/Electrolyte Disturbances. Significant characteristics specific to this group of patients are: an average age of 79 years; 38% of these patients were transferred from other communities, all cases had multiple co-morbidities and/or complications, and 38% of these patients experienced a rapid deterioration in their condition. A specialist evaluated and/or treated 87% of these patients. We were unable to verify 25% of the deaths that occurred in this category.

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Metropolitan Hospital has active Quality Assurance, Utilization Review, and Risk Management programs. It is our goal to monitor quality of care, appropriateness of patient care, and effectiveness of the programs and services we provide. We welcome information from external sources, such as HCFA, to incorporate into our internal review systems. Our physicians review this information, evaluate those factors affecting outcomes, identify trends or patterns, and take action whenever opportunities to improve patient care are identified.

Metropolitan Hospital is committed to providing a comprehensive array of primary patient care and services designed to meet the needs of its community, and improving these services to the Medicare population, as well as, all other patients treated at our institution.

Sincerely,



TW/bl

Francis J. McCarthy
President

MICHIGAN OSTEO MED CTR INC EAST UNIT

2700 MARTIN LUTHER KING JR BLV
DETROIT, MI 48208

Medicare Hospital Provider Number: 230221

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	824	12	11 - 16	826	12	11 - 17
Cancer	26	23	27 - 62	22	32	26 - 65
Cerebrovascular Accidents	30	27	14 - 46	41	15	15 - 39
Gastrointestinal Catastrophes	3	0	3 - 80	11	36	18 - 72
Infectious Disease	21	19	23 - 60	21	19	18 - 56
Metabolic/Electrolyte Disorders	18	28	9 - 53	27	26	13 - 50
Pulmonary Disease	51	24	15 - 40	66	30	17 - 41
Renal Failure	6	33	4 - 77	14	29	12 - 70
Severe Acute Heart Disease	30	33	23 - 57	14	14	16 - 56
Severe Chronic Heart Disease	72	11	14 - 31	75	13	14 - 31
Severe Trauma	0	-	-	1	0	3 -100
Gastrointestinal Disease	45	2	1 - 18	40	2	0 - 35
Gynecologic Disease	1	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	131	3	1 - 9	120	3	1 - 10
Musculoskeletal/Skin Conditions	50	4	0 - 30	37	0	1 - 14
Neuropsychiatric/Sensory Disease	15	0	0 -100	16	6	0 -100
Urologic Disease	33	0	0 - 39	42	2	0 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	240
Occupancy Rate (%):	37
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	138
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	21
Registered Nurses:	97
Licensed Practical Nurses:	37

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Edward I. Orley
President and
Chief Executive Officer

Michigan Osteopathic Medical Center
Subsidiary of Michigan Health Care Corporation
Corporate Offices
7430 Second Ave. Detroit, Michigan 48202
(313) 874-9110

October 21, 1988

ATTN: Ms. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Bldg.
6325 Security Blvd.
Baltimore, MD 21207

William Roper, M.D.
Administration
Health Care Financing Administration
Department of Health and Human Services
Washington, D.C.

Dear Dr. Roper:

Michigan Osteopathic Medical Center, provider #230221, would like to offer its comments on the HCFA mortality data to be released later this year.

The medical/surgical unit of Michigan Osteopathic Medical Center (MOMC) is a 240 bed acute care hospital located in Detroit's inner city. Our patient population is poor (53% Medicaid and General Assistance), non-white (83% Black, Hispanic, other) and elderly (20% Medicare). This service base continues to have higher unmet health care needs, more chronic conditions, poorer outcomes and a decreased ability to pay. We provide services to our community without regard to our patients' economic status.

The HCFA mortality data show that MOMC mortality rates are below the expected range for four of the disease categories and below the midpoint of the expected ranges for all others.

A review of our patients' medical records shows that they were elderly (50% were over 77 years of age). The mean age for patients in the categories severe heart disease and renal disease was over 80. The mean age for those patients with chronic heart disease was 79 years. One quarter of the patients reported in the HCFA data were not candidates for heroic, life-sustaining measures, as determined by concurrence between patient, family and physician. A significant number of patients also had chronic debilitating conditions, as evidenced by their having been admitted from a nursing home.

Ten percent of these patients expired out of the hospital. All patients were found to be medically stable or refusing treatment at the time of discharge. Forty percent of the post discharge deaths occurred in patients with cancer.

Although the HCFA data demonstrates MOMC's performance was within the predicted range based upon patient characteristics, our hospital will continue its efforts to improve the quality of care it provides in an unfavorable reimbursement climate. The HCFA data are being incorporated into the MOMC Quality Management Program. Our aim is to continue to strengthen our peer review activities and maintain the high standards of care our patients expect.

Very ~~truly~~ yours,

Edward I. Orley
President and Chief Executive Officer

EIO/pmd
Attachment

MIDLAND HOSPITAL ASSOCIATION

4005 ORCHARD DRIVE
MIDLAND, MI 48640

Medicare Hospital Provider Number: 230222

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,961	11	10 - 14	1,778	11	10 - 15
Cancer	86	50	33 - 58	87	44	30 - 55
Cerebrovascular Accidents	72	28	15 - 37	72	24	16 - 37
Gastrointestinal Catastrophes	17	35	21 - 67	8	50	8 - 71
Infectious Disease	20	25	14 - 54	25	48	18 - 58
Metabolic/Electrolyte Disorders	19	32	9 - 53	24	29	10 - 50
Pulmonary Disease	78	27	19 - 41	68	13	19 - 39
Renal Failure	4	50	8 - 87	6	83	17 - 84
Severe Acute Heart Disease	80	38	25 - 49	75	36	27 - 51
Severe Chronic Heart Disease	58	19	14 - 35	65	15	13 - 33
Severe Trauma	10	40	10 - 68	6	17	10 - 73
Gastrointestinal Disease	120	0	1 - 6	121	4	1 - 11
Gynecologic Disease	22	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	262	2	2 - 6	240	2	2 - 6
Musculoskeletal/Skin Conditions	296	2	1 - 5	233	1	1 - 5
Neuropsychiatric/Sensory Disease	50	6	1 - 23	41	2	0 - 35
Urologic Disease	88	0	0 - 9	77	4	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	307
Occupancy Rate (%):	70
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	94
Percent of Physicians Who Are Board Certified Specialists:	87
Interns and Residents:	17
Registered Nurses:	182
Licensed Practical Nurses:	84

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MIDLAND
HOSPITAL
CENTER

A Subsidiary of
MID-MICHIGAN
HEALTH CARE SYSTEMS, INC.

October 20, 1988 MEDICARE PROVIDER #230222

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

The following are our comments relative to the mortality data for our hospital which is to be included in the publication Medicare Hospital Mortality Information (1987).

As we did last year, we want to express our appreciation to HCFA for the opportunity to review the data prior to publication and to submit our comments for inclusion with the data release. We also were pleased to see the changes made in the diagnostic categories and in the names assigned to the categories.

Although we were well within the range for predicted mortality for all cases, and for each of the 16 diagnostic categories, we did once again review each and every patient record. Many, of course, had previously been reviewed, as mortality data has always been included in our quality assurance program.

However, our concern continues to be that by itself, mortality data is of limited value. As Dr. Roper, administrator of HCFA, stated in his letter which accompanied the data, "...until we have developed additional statistical measures to deal with complex issues such as severity of illness, we cannot and do not recommend the use of the information by itself to make judgements about the quality of care in an individual hospital or to make comparisons among hospitals."

We will look forward to continued improvement in the data methodologies used by HCFA, so that the information is more accurate and useful. In the meantime, we would encourage anyone with a question relative to the data to discuss it with his or her physician, or a hospital representative.

Sincerely,

David A. Reece
President

MILTON COMMUNITY HOSPITAL

234 VISGER RD
RIVER ROUGE, MI 48218

Medicare Hospital Provider Number: 230123

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	7	0	1 - 57	60	8	4 - 20
Cancer	0	-	-	3	67	9 - 90
Cerebrovascular Accidents	0	-	-	1	0	0 - 98
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	1	0	1 - 97
Metabolic/Electrolyte Disorders	1	0	0 - 99	1	0	0 - 99
Pulmonary Disease	1	0	0 - 99	2	0	0 - 99
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	1	0	0 - 99
Severe Chronic Heart Disease	0	-	-	4	25	1 - 82
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	6	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	1	0	0 -100	7	0	0 -100
Musculoskeletal/Skin Conditions	0	-	-	7	0	0 -100
Neuropsychiatric/Sensory Disease	0	-	-	6	17	0 -100
Urologic Disease	0	-	-	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	88
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

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21230 DEQUINDRE ROAD
WARREN, MI 48091

Medicare Hospital Provider Number: 230264

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	27	0	0 - 49	36	0	0 - 43
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	0	-	-
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	0	-	-
Musculoskeletal/Skin Conditions	21	0	0 - 80	26	0	0 - 99
Neuropsychiatric/Sensory Disease	1	0	0 -100	1	0	0 -100
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	45
Occupancy Rate (%):	13
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	114
Percent of Physicians Who Are Board Certified Specialists:	40
Interns and Residents:	10
Registered Nurses:	17
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MORENCI AREA HOSP

13101 SIMS HIGHWAY
MORENCI, MI 49256

Medicare Hospital Provider Number: 230113

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	108	10	8 - 20	102	12	6 - 19
Cancer	2	50	4 - 92	0	-	-
Cerebrovascular Accidents	2	100	2 - 89	1	100	1 - 97
Gastrointestinal Catastrophes	1	0	0 - 98	0	-	-
Infectious Disease	1	0	0 - 99	0	-	-
Metabolic/Electrolyte Disorders	1	0	0 -100	1	0	0 - 99
Pulmonary Disease	5	40	2 - 78	9	0	4 - 45
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	8	38	15 - 74	4	25	11 - 84
Severe Chronic Heart Disease	14	0	17 - 42	13	15	6 - 50
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	8	0	0 - 99	6	17	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	22	0	0 - 35	21	5	0 - 65
Musculoskeletal/Skin Conditions	7	0	0 -100	9	0	0 - 99
Neuropsychiatric/Sensory Disease	1	0	0 -100	2	0	0 -100
Urologic Disease	4	0	0 -100	2	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	24
Occupancy Rate (%):	32
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	5
Percent of Physicians Who Are Board Certified Specialists:	60
Interns and Residents:	0
Registered Nurses:	10
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MOUNT CLEMENS GENERAL HOSPITAL

1000 HARRINGTON BLVD
MOUNT CLEMENS, MI 48043

Medicare Hospital Provider Number: 230227

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,463	13	10 - 15	1,584	14	9 - 14
Cancer	55	35	28 - 56	53	47	26 - 56
Cerebrovascular Accidents	51	35	15 - 42	54	31	14 - 40
Gastrointestinal Catastrophes	25	40	19 - 59	22	27	14 - 54
Infectious Disease	12	42	10 - 63	16	31	17 - 62
Metabolic/Electrolyte Disorders	27	22	16 - 51	17	18	5 - 48
Pulmonary Disease	63	30	15 - 40	78	31	15 - 38
Renal Failure	9	22	14 - 75	6	50	7 - 79
Severe Acute Heart Disease	56	50	24 - 51	57	42	25 - 52
Severe Chronic Heart Disease	81	21	13 - 32	113	27	15 - 33
Severe Trauma	6	33	6 - 74	1	0	0 - 98
Gastrointestinal Disease	100	3	1 - 11	98	3	1 - 12
Gynecologic Disease	19	5	0 -100	24	0	0 -100
Low-Risk Heart Disease	222	3	1 - 7	254	7	1 - 9
Musculoskeletal/Skin Conditions	131	2	1 - 8	114	4	0 - 13
Neuropsychiatric/Sensory Disease	28	0	0 - 31	46	0	0 - 21
Urologic Disease	50	4	0 - 40	51	4	0 - 23

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	288
Occupancy Rate (%):	54
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	121
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	28
Registered Nurses:	176
Licensed Practical Nurses:	53

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MT CARMEL MERCY HOSPITAL AND MED CTR

6071 W OUTER DR
DETROIT, MI 48235

Medicare Hospital Provider Number: 230039

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,548	16	12 - 16	2,796	13	11 - 15
Cancer	96	40	31 - 55	86	41	29 - 53
Cerebrovascular Accidents	127	24	17 - 34	109	21	19 - 36
Gastrointestinal Catastrophes	18	39	17 - 62	29	34	11 - 49
Infectious Disease	69	55	27 - 54	52	42	27 - 58
Metabolic/Electrolyte Disorders	83	39	17 - 44	71	28	16 - 43
Pulmonary Disease	122	35	18 - 38	114	26	18 - 37
Renal Failure	43	21	9 - 56	31	35	9 - 61
Severe Acute Heart Disease	79	41	28 - 52	96	33	28 - 49
Severe Chronic Heart Disease	162	17	17 - 30	211	20	16 - 29
Severe Trauma	8	25	7 - 67	10	0	7 - 48
Gastrointestinal Disease	143	8	1 - 13	175	5	1 - 10
Gynecologic Disease	12	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	345	4	2 - 7	392	3	2 - 6
Musculoskeletal/Skin Conditions	178	2	1 - 7	229	3	1 - 7
Neuropsychiatric/Sensory Disease	58	7	0 - 29	81	4	1 - 13
Urologic Disease	91	3	0 - 18	85	5	0 - 23

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	551
Ownership/Control:	Church

STAFFING

Interns and Residents:	109
Registered Nurses:	389
Licensed Practical Nurses:	70

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

MUNISING MEM HOSP

SAND POINT RD
MUNISING, MI 49862

Medicare Hospital Provider Number: 230116

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	204	19	8 - 19	186	17	7 - 19
Cancer	1	100	2 - 97	0	-	-
Cerebrovascular Accidents	13	38	8 - 58	7	57	5 - 71
Gastrointestinal Catastrophes	2	100	8 - 92	0	-	-
Infectious Disease	1	0	0 - 99	4	0	10 - 74
Metabolic/Electrolyte Disorders	5	20	3 - 74	10	20	11 - 63
Pulmonary Disease	13	31	10 - 59	12	17	7 - 53
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	6	50	7 - 75	5	60	6 - 78
Severe Chronic Heart Disease	10	50	7 - 64	10	40	6 - 63
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	15	0	0 - 43	15	0	0 - 98
Gynecologic Disease	3	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	24	4	0 - 42	21	5	0 - 44
Musculoskeletal/Skin Conditions	11	0	1 - 46	14	0	0 - 87
Neuropsychiatric/Sensory Disease	7	0	0 -100	6	0	0 -100
Urologic Disease	2	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	40
Occupancy Rate (%):	20
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	3
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	10
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MUNSON MEDICAL CENTER

1105 SIXTH STREET
TRAVERSE CITY, MI 49684

Medicare Hospital Provider Number: 230097

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,744	10	10 - 14	2,479	11	10 - 14
Cancer	109	38	32 - 55	86	35	29 - 53
Cerebrovascular Accidents	105	25	16 - 34	97	29	16 - 36
Gastrointestinal Catastrophes	30	33	20 - 57	18	33	14 - 59
Infectious Disease	23	48	16 - 58	22	27	22 - 62
Metabolic/Electrolyte Disorders	40	5	17 - 41	30	20	12 - 46
Pulmonary Disease	96	19	18 - 37	102	26	17 - 38
Renal Failure	11	27	18 - 77	6	83	17 - 83
Severe Acute Heart Disease	89	44	29 - 51	85	29	29 - 51
Severe Chronic Heart Disease	108	19	14 - 31	104	27	15 - 34
Severe Trauma	9	22	5 - 63	7	43	5 - 72
Gastrointestinal Disease	150	1	2 - 6	147	2	1 - 8
Gynecologic Disease	43	0	0 -100	33	0	0 -100
Low-Risk Heart Disease	287	3	2 - 7	291	4	2 - 7
Musculoskeletal/Skin Conditions	363	2	1 - 5	289	2	1 - 5
Neuropsychiatric/Sensory Disease	92	2	1 - 11	75	1	0 - 13
Urologic Disease	189	0	0 - 5	135	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	292
Occupancy Rate (%):	83
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	155
Percent of Physicians Who Are Board Certified Specialists:	88
Interns and Residents:	0
Registered Nurses:	291
Licensed Practical Nurses:	102

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MUSKEGON GENERAL HOSPITAL

1700 OAK AVENUE
MUSKEGON, MI 49442

Medicare Hospital Provider Number: 230159

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	533	12	7 - 14	612	13	8 - 14
Cancer	9	44	15 - 74	12	42	18 - 70
Cerebrovascular Accidents	12	17	10 - 54	26	23	13 - 46
Gastrointestinal Catastrophes	4	25	10 - 84	6	17	12 - 74
Infectious Disease	6	50	6 - 75	6	67	9 - 76
Metabolic/Electrolyte Disorders	7	57	5 - 71	14	43	9 - 60
Pulmonary Disease	26	23	9 - 44	29	28	8 - 43
Renal Failure	2	50	3 - 93	2	50	3 - 93
Severe Acute Heart Disease	17	47	17 - 62	22	41	24 - 64
Severe Chronic Heart Disease	42	36	11 - 40	34	21	10 - 39
Severe Trauma	2	0	1 - 90	2	0	0 - 92
Gastrointestinal Disease	31	3	0 - 32	42	5	0 - 30
Gynecologic Disease	4	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	57	5	1 - 20	56	2	1 - 14
Musculoskeletal/Skin Conditions	76	1	0 - 14	73	0	0 - 8
Neuropsychiatric/Sensory Disease	15	0	0 - 96	10	0	0 -100
Urologic Disease	16	0	0 - 99	21	0	0 - 90

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	127
Occupancy Rate (%):	49
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	60
Percent of Physicians Who Are Board Certified Specialists:	57
Interns and Residents:	2
Registered Nurses:	83
Licensed Practical Nurses:	41

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

NEW CENTER HOSPITAL

801 VIRGINIA PARK
DETROIT, MI 48202

Medicare Hospital Provider Number: 230012

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	150	18	11 - 23	130	12	7 - 20
Cancer	3	33	6 - 87	3	67	8 - 88
Cerebrovascular Accidents	19	37	13 - 55	16	31	13 - 57
Gastrointestinal Catastrophes	3	33	8 - 88	0	-	-
Infectious Disease	1	0	0 - 98	0	-	-
Metabolic/Electrolyte Disorders	10	30	8 - 64	11	9	10 - 54
Pulmonary Disease	15	33	11 - 58	4	25	1 - 84
Renal Failure	1	0	3 - 98	1	0	0 - 98
Severe Acute Heart Disease	1	100	2 - 97	1	100	1 - 97
Severe Chronic Heart Disease	6	17	4 - 68	5	20	1 - 78
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	2	0	0 -100	2	0	0 - 94
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	25	12	0 - 85	19	16	0 - 90
Musculoskeletal/Skin Conditions	14	0	0 - 95	15	13	0 - 99
Neuropsychiatric/Sensory Disease	11	0	0 -100	1	0	0 -100
Urologic Disease	2	0	0 -100	5	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	145
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

NORTH DETROIT GEN HOSP

3105 CARPENTER
DETROIT, MI 48212

Medicare Hospital Provider Number: 230173

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,166	18	12 - 18	1,264	16	11 - 16
Cancer	29	38	24 - 60	26	58	19 - 58
Cerebrovascular Accidents	51	22	16 - 40	70	21	18 - 39
Gastrointestinal Catastrophes	18	39	13 - 59	7	43	14 - 78
Infectious Disease	19	37	19 - 63	15	53	18 - 67
Metabolic/Electrolyte Disorders	33	27	11 - 46	69	36	14 - 42
Pulmonary Disease	95	32	18 - 40	95	28	17 - 38
Renal Failure	11	36	17 - 78	4	50	6 - 85
Severe Acute Heart Disease	77	58	28 - 52	60	42	26 - 53
Severe Chronic Heart Disease	80	30	13 - 34	72	28	14 - 36
Severe Trauma	3	0	5 - 80	0	-	-
Gastrointestinal Disease	53	4	0 - 20	55	7	1 - 23
Gynecologic Disease	7	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	172	6	1 - 10	178	6	1 - 10
Musculoskeletal/Skin Conditions	90	6	0 - 18	109	2	1 - 9
Neuropsychiatric/Sensory Disease	34	6	0 - 48	33	0	0 - 22
Urologic Disease	26	0	1 - 21	42	2	1 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	319
Occupancy Rate (%):	43
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	107
Percent of Physicians Who Are Board Certified Specialists:	54
Interns and Residents:	3
Registered Nurses:	112
Licensed Practical Nurses:	39

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

NORTH OTTAWA COMM HOSP

1309 SHELDON RD
GRAND HAVEN, MI 49417

Medicare Hospital Provider Number: 230174

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	765	12	8 - 14	726	14	9 - 15
Cancer	20	50	21 - 64	23	52	18 - 59
Cerebrovascular Accidents	27	37	10 - 47	22	41	10 - 51
Gastrointestinal Catastrophes	3	67	6 - 87	10	20	10 - 62
Infectious Disease	11	9	14 - 57	9	33	12 - 70
Metabolic/Electrolyte Disorders	23	26	11 - 51	17	35	6 - 54
Pulmonary Disease	29	14	14 - 42	37	24	12 - 42
Renal Failure	3	0	5 - 81	5	40	11 - 85
Severe Acute Heart Disease	32	19	25 - 54	30	40	21 - 56
Severe Chronic Heart Disease	31	32	10 - 43	33	33	13 - 46
Severe Trauma	1	100	3 - 98	1	0	1 - 97
Gastrointestinal Disease	52	6	0 - 35	57	5	0 - 27
Gynecologic Disease	10	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	85	5	1 - 14	75	1	1 - 10
Musculoskeletal/Skin Conditions	73	1	0 - 14	73	1	0 - 23
Neuropsychiatric/Sensory Disease	12	0	0 -100	13	8	0 - 99
Urologic Disease	55	4	0 - 32	29	0	0 - 71

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	104
Occupancy Rate (%):	40
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	61
Percent of Physicians Who Are Board Certified Specialists:	51
Interns and Residents:	0
Registered Nurses:	82
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

NORTHERN MICHIGAN HOSPITALS

416 CONNABLE AVE
PETOSKEY, MI 49770

Medicare Hospital Provider Number: 230105

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,435	10	10 - 14	2,240	11	10 - 14
Cancer	127	39	31 - 53	122	38	31 - 53
Cerebrovascular Accidents	81	21	17 - 36	78	24	17 - 37
Gastrointestinal Catastrophes	20	30	19 - 61	12	33	13 - 65
Infectious Disease	28	25	22 - 57	24	21	19 - 55
Metabolic/Electrolyte Disorders	23	4	14 - 42	20	5	12 - 42
Pulmonary Disease	68	28	18 - 41	56	32	16 - 42
Renal Failure	33	18	14 - 61	24	13	9 - 59
Severe Acute Heart Disease	103	36	27 - 48	109	26	26 - 45
Severe Chronic Heart Disease	91	13	16 - 31	75	24	15 - 36
Severe Trauma	5	0	6 - 65	4	25	3 - 81
Gastrointestinal Disease	165	1	2 - 7	152	4	1 - 9
Gynecologic Disease	24	0	0 -100	21	0	0 - 98
Low-Risk Heart Disease	411	3	2 - 6	322	3	2 - 6
Musculoskeletal/Skin Conditions	226	2	1 - 6	252	2	1 - 6
Neuropsychiatric/Sensory Disease	86	3	0 - 15	79	3	0 - 15
Urologic Disease	108	0	1 - 6	84	1	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	260
Occupancy Rate (%):	67
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	93
Percent of Physicians Who Are Board Certified Specialists:	96
Interns and Residents:	0
Registered Nurses:	217
Licensed Practical Nurses:	48

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

NORTHERN MICHIGAN HOSPITALS
INCORPORATED
PETOSKEY, MICHIGAN 49770, (616) 348-4000

October 21, 1988

Health Care Financing Administration
Department of Health and Human Services
PO Box 26676
Baltimore, MD 21201

Re: Mortality Rates Released September 1988

Gentlemen/Ladies:

Northern Michigan Hospitals appreciates the opportunity to comment on the recently released information regarding hospital specific mortality rates for our Medicare patients treated in 1987 and 1986. We believe that the opportunity to comment on the statistics is one that is important for all of us in the healthcare industry in order to assist the general public in better understanding the data and its application.

This communication will not deal in depth with the appropriateness or usefulness of this data because we have previously communicated our concerns that this data is incomplete, inappropriately configured and largely unusable by the general public in making healthcare decisions. Instead, we will comment on the data you released to Northern Michigan Hospitals and its accuracy.

A review of the statistics reveals that the patient data reviewed is correct with the exception of one person who was not treated in our facility. We also confirmed your findings that in every case, Northern Michigan Hospitals fell within or below the expected ranges for our hospital.

We are concerned again with the formula used to create the data. In an institution like ours, for example, it is impossible to create useful data without taking into consideration the kinds and severity of all patients admitted to our facility. HCFA's new mortality acuity adjustment system is an improvement over previous year's data but since it is confined only to four categories, it is limited in its value.

We have long felt that the severity of illness should be addressed in each and every case studied by HCFA. Similarly, we believe that the case mix index for hospitals should be an important factor in looking at the HCFA data. Our hospital has a considerably higher case mix index than other hospitals in our area (1.429 as of September 30, 1988) and we receive more than 50 percent of our patients by referral from physicians not on our staff. As you can see, we are not a 'typical' community hospital.

There are several errors in the hospital characteristics noted in the released data as compiled by AHA. Although use of such data is a positive step in defining specific characteristics of a hospital to the public, it must be correct. First, the hospital ID number listed for Lockwood-MacDonald Hospital, which is actually the Northern Michigan Hospitals' Lockwood-MacDonald Division, is incorrect.

Additionally, the one patient listed as a death at Lockwood-MacDonald was not treated in our facility.

Second, in our 1986 AHA survey, we listed 260 staffed beds and 299 licensed beds, not 166 as recorded in the mortality information.

Third, although the number of physicians listed is correct at 96, 91 percent are board certified, not 79 percent as is reported. Also incorrect is our percent of occupancy--65.9 percent, not 69 percent.

Northern Michigan Hospitals is also listed as providing a shock/trauma or burn unit and an organ transplant service, both of which we do not provide. The characteristics also state that we do not have a coronary care unit, which we do.

Again this year, we would communicate to you our concern that mortality data alone is not a true indicator of the quality of care of a hospital. We would prefer to see all patients, not just Medicare patients, included in such a study that would also take into consideration a case mix index. Northern Michigan Hospitals prides itself on our high quality of care and our quality assurance work goes on regardless of the release of your data. Our concern for quality assurance is due to the need we have to assure our patients that they will continue to get the highest possible level of care that our staff can provide.

We appreciate the opportunity to comment on the data to be released to the public and hope that our comments bring to light the limited significance of such data as a true measure of quality medical care.

Sincerely,

Jeffrey T. Wendling
Senior Vice President, Operations

NORTHWEST GENERAL OSTEOPATHIC HOSPIT

8741 W CHICAGO BLVD
DETROIT, MI 48204

Medicare Hospital Provider Number: 230224

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	310	9	8 - 15	267	6	8 - 15
Cancer	5	40	11 - 81	4	25	8 - 82
Cerebrovascular Accidents	5	20	3 - 74	16	19	12 - 52
Gastrointestinal Catastrophes	5	20	5 - 74	3	33	3 - 86
Infectious Disease	3	33	3 - 86	1	100	3 - 98
Metabolic/Electrolyte Disorders	15	20	8 - 53	9	11	10 - 59
Pulmonary Disease	21	19	10 - 46	16	13	13 - 50
Renal Failure	2	0	2 - 89	1	0	2 - 97
Severe Acute Heart Disease	12	42	13 - 65	2	0	2 - 89
Severe Chronic Heart Disease	28	4	13 - 33	20	0	14 - 34
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	26	8	0 - 63	22	0	1 - 25
Gynecologic Disease	2	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	54	6	0 - 30	52	2	0 - 19
Musculoskeletal/Skin Conditions	19	0	0 - 59	20	0	0 - 34
Neuropsychiatric/Sensory Disease	6	0	0 - 97	9	11	0 -100
Urologic Disease	20	0	0 - 61	13	0	0 - 91

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	104
Occupancy Rate (%):	50
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	23
Percent of Physicians Who Are Board Certified Specialists:	39
Interns and Residents:	0
Registered Nurses:	48
Licensed Practical Nurses:	39

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

OAKLAND GENERAL HOSPITAL

27351 DEQUINDRE
MADISON HEIGHTS, MI 48071

Medicare Hospital Provider Number: 230223

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,217	13	11 - 16	1,250	16	11 - 17
Cancer	44	50	31 - 62	49	41	28 - 58
Cerebrovascular Accidents	45	22	15 - 40	32	19	13 - 42
Gastrointestinal Catastrophes	12	50	15 - 68	18	22	17 - 59
Infectious Disease	15	40	18 - 66	22	50	19 - 62
Metabolic/Electrolyte Disorders	30	33	11 - 49	34	29	11 - 46
Pulmonary Disease	74	27	16 - 39	77	38	14 - 38
Renal Failure	4	50	4 - 84	7	43	10 - 79
Severe Acute Heart Disease	45	42	23 - 53	55	44	24 - 52
Severe Chronic Heart Disease	82	20	15 - 34	88	23	15 - 34
Severe Trauma	2	100	2 - 89	1	0	0 - 97
Gastrointestinal Disease	69	4	1 - 16	66	6	1 - 18
Gynecologic Disease	13	0	0 - 99	11	0	0 -100
Low-Risk Heart Disease	151	2	2 - 7	176	2	1 - 7
Musculoskeletal/Skin Conditions	89	2	1 - 11	91	3	1 - 12
Neuropsychiatric/Sensory Disease	32	0	0 - 24	18	11	0 - 85
Urologic Disease	41	0	0 - 30	39	0	0 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	134
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	128
Percent of Physicians Who Are Board Certified Specialists:	86
Interns and Residents:	41
Registered Nurses:	132
Licensed Practical Nurses:	25

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

OAKLAND GENERAL HOSPITAL
Osteopathic

MEDICARE PROVIDER #
23-0223

Oakland General Hospital would like to take this opportunity to acknowledge and support HCFA's ongoing efforts to provide national quality indicators for providers and consumers of health care. Oakland General Hospital is pleased again to note that application of 1987 methodology to the 1986 and 1987 data demonstrated that the Hospital's actual mortality rate for **both** years falls within the national predicted ranges in each and every assessed category.

We agree that the statistical model utilized in analysis of HCFA is lacking in any significant analysis of severity of illness variables. Accordingly, efforts directed toward predicting mortality based primarily on diagnosis, sex, age and Medicare status have extremely limited use. The analysis excludes critical variables such as 1) preadmission status; 2) history of previous admissions; 3) duration of disease; 4) type of facility and services provided; 5) mode of admission; 6) code status; 7) purpose of admission (curative, supportive or terminal), to mention a few.

Another critical variable which should be considered within the statistical model is the impact of preadmission review programs. These programs have been developed to assure that patients admitted to hospitals require care which cannot be provided on an outpatient or extended care basis. Thus, the total population of patients admitted to hospitals today is smaller than three years ago and their level of care (acuity) is much higher. It is reasonable to postulate that any patient admitted for acute care is at a higher risk for death because of stringent use of admission criteria.

We concur that a primary purpose of HCFA's mortality monitoring efforts is to help hospitals and physicians interpret the data and to evaluate internal practice patterns. It is very difficult to meet this objective because of the lack of reproducibility between the HCFA data and other monitoring agencies, (i.e., Peer Review Organizations). To be meaningful, data collection should be consistent and readily reproducible by independent analysis. It should also be noted that research today has not identified any direct correlation between quality of care and mortality rates.

Oakland General Hospital is dedicated to quality care. All deaths at Oakland General Hospital are considered to be significant and thus we have continued our internal management system requiring 100% mortality review. The results from mortality review are used to direct dynamic educational efforts, to maintain effective credentialing processes and to refine practice patterns.

We thank you again for allowing us to share our thoughts on this subject prior to publication.

10/88
OMJ/jp

OAKLAWN HOSPITAL

200 N MADISON
MARSHALL, MI 49068

Medicare Hospital Provider Number: 230217

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	394	11	8 - 16	470	12	7 - 14
Cancer	6	33	11 - 77	5	40	7 - 78
Cerebrovascular Accidents	14	29	8 - 55	8	13	9 - 61
Gastrointestinal Catastrophes	1	0	2 - 97	5	40	3 - 78
Infectious Disease	3	33	6 - 87	11	18	10 - 59
Metabolic/Electrolyte Disorders	4	0	1 - 75	5	20	1 - 77
Pulmonary Disease	44	23	13 - 40	35	29	8 - 40
Renal Failure	2	50	4 - 93	2	50	6 - 95
Severe Acute Heart Disease	21	29	20 - 59	16	31	19 - 63
Severe Chronic Heart Disease	11	18	7 - 55	34	41	10 - 44
Severe Trauma	1	0	0 - 99	1	0	0 - 98
Gastrointestinal Disease	26	12	0 - 79	54	4	0 - 33
Gynecologic Disease	4	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	47	4	0 - 33	52	6	0 - 26
Musculoskeletal/Skin Conditions	47	2	0 - 64	47	4	0 - 52
Neuropsychiatric/Sensory Disease	5	20	0 -100	15	0	0 - 98
Urologic Disease	20	10	0 - 90	20	0	0 - 62

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	77
Occupancy Rate (%):	38
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	25
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	0
Registered Nurses:	53
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

OAKWOOD DOWNRIVER MEDICAL CENTER

25750 WEST OUTER DRIVE
LINCOLN PARK, MI 48146

Medicare Hospital Provider Number: 230007

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	281	10	7 - 15	321	13	8 - 17
Cancer	8	25	14 - 71	7	71	18 - 79
Cerebrovascular Accidents	16	19	9 - 50	9	33	9 - 66
Gastrointestinal Catastrophes	0	-	-	3	67	11 - 92
Infectious Disease	1	0	0 - 98	3	0	3 - 79
Metabolic/Electrolyte Disorders	6	67	14 - 80	10	20	3 - 60
Pulmonary Disease	13	8	9 - 46	10	40	13 - 69
Renal Failure	0	-	-	2	50	2 - 92
Severe Acute Heart Disease	16	44	14 - 60	14	36	23 - 70
Severe Chronic Heart Disease	8	13	4 - 59	17	12	9 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	25	0	0 - 47	18	6	0 - 66
Gynecologic Disease	7	14	0 -100	1	0	0 -100
Low-Risk Heart Disease	43	5	0 - 26	54	7	1 - 23
Musculoskeletal/Skin Conditions	24	0	1 - 23	27	4	0 - 83
Neuropsychiatric/Sensory Disease	14	7	0 -100	17	6	0 -100
Urologic Disease	15	0	0 -100	17	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	68
Occupancy Rate (%):	36
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	77
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	36
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

OAKWOOD HOSPITAL

18101 OAKWOOD BLVD
DEARBORN, MI 48124

Medicare Hospital Provider Number: 230020

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,738	16	12 - 16	4,580	14	12 - 16
Cancer	223	46	31 - 50	253	42	34 - 53
Cerebrovascular Accidents	238	36	20 - 34	208	27	22 - 37
Gastrointestinal Catastrophes	42	29	19 - 51	37	32	17 - 52
Infectious Disease	72	47	26 - 53	61	36	23 - 52
Metabolic/Electrolyte Disorders	67	31	14 - 42	89	25	14 - 39
Pulmonary Disease	265	34	20 - 35	210	21	19 - 35
Renal Failure	37	51	21 - 70	37	35	20 - 70
Severe Acute Heart Disease	202	49	30 - 47	215	46	31 - 47
Severe Chronic Heart Disease	286	30	17 - 30	286	26	17 - 29
Severe Trauma	8	50	7 - 70	12	25	6 - 59
Gastrointestinal Disease	295	4	1 - 7	328	4	1 - 7
Gynecologic Disease	46	0	0 -100	51	0	0 -100
Low-Risk Heart Disease	752	4	2 - 5	628	3	2 - 5
Musculoskeletal/Skin Conditions	386	2	1 - 6	332	3	1 - 6
Neuropsychiatric/Sensory Disease	123	6	0 - 17	122	4	0 - 12
Urologic Disease	168	4	0 - 11	141	1	1 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	615
Occupancy Rate (%):	78
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	295
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	78
Registered Nurses:	495
Licensed Practical Nurses:	86

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

OCEANA HOSPITAL

611 E MAIN ST
HART, MI 49420

Medicare Hospital Provider Number: 230051

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	130	15	7 - 20	165	11	8 - 19
Cancer	1	100	0 - 97	1	100	3 - 98
Cerebrovascular Accidents	11	27	6 - 59	10	30	7 - 62
Gastrointestinal Catastrophes	1	100	2 - 98	2	0	2 - 89
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	2	0	0 - 97	9	22	7 - 63
Pulmonary Disease	12	25	9 - 58	13	15	7 - 51
Renal Failure	0	-	-	2	0	3 - 89
Severe Acute Heart Disease	6	33	6 - 73	5	60	8 - 79
Severe Chronic Heart Disease	12	17	6 - 52	15	33	8 - 55
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	12	0	0 - 94	15	0	0 - 58
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	21	0	0 - 35	34	0	1 - 17
Musculoskeletal/Skin Conditions	8	0	0 - 98	8	0	0 -100
Neuropsychiatric/Sensory Disease	3	0	0 -100	3	0	0 -100
Urologic Disease	5	0	0 -100	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	36
Occupancy Rate (%):	14
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	12
Percent of Physicians Who Are Board Certified Specialists:	92
Interns and Residents:	0
Registered Nurses:	10
Licensed Practical Nurses:	9

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ONTONAGON MEMORIAL HOSPITAL

601 7TH ST
ONTONAGON, MI 49953

Medicare Hospital Provider Number: 230219

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	241	8	8 - 16	230	6	7 - 15
Cancer	2	0	5 - 89	2	0	11 - 95
Cerebrovascular Accidents	9	44	6 - 66	5	40	6 - 78
Gastrointestinal Catastrophes	2	100	5 - 89	0	-	-
Infectious Disease	1	100	1 - 97	2	50	4 - 93
Metabolic/Electrolyte Disorders	1	0	0 -100	1	0	3 - 99
Pulmonary Disease	16	25	5 - 50	13	8	9 - 47
Renal Failure	1	0	3 - 99	1	0	0 - 99
Severe Acute Heart Disease	13	15	25 - 67	8	38	11 - 71
Severe Chronic Heart Disease	27	4	11 - 31	24	4	16 - 38
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	28	0	0 - 29	19	0	0 - 31
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	28	0	0 - 22	28	4	0 - 31
Musculoskeletal/Skin Conditions	15	0	0 - 96	29	7	0 - 62
Neuropsychiatric/Sensory Disease	8	0	0 - 98	14	7	0 -100
Urologic Disease	8	0	0 -100	2	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	87
Occupancy Rate (%):	68
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	11
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	0
Registered Nurses:	10
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ORCHARD HILLS HOSPITAL

1534 W STATE STREET
BELDING, MI 48809

Medicare Hospital Provider Number: 230181

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	90	14	8 - 24	87	20	9 - 27
Cancer	4	100	13 - 76	3	67	8 - 89
Cerebrovascular Accidents	2	50	3 - 92	2	0	0 - 93
Gastrointestinal Catastrophes	0	-	-	1	100	0 - 98
Infectious Disease	3	33	6 - 87	2	50	2 - 92
Metabolic/Electrolyte Disorders	2	0	0 - 98	6	17	4 - 69
Pulmonary Disease	10	20	11 - 61	12	33	6 - 59
Renal Failure	0	-	-	2	50	7 - 96
Severe Acute Heart Disease	4	0	10 - 74	4	50	11 - 87
Severe Chronic Heart Disease	14	21	4 - 51	8	13	3 - 60
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	9	0	0 -100	11	9	0 - 94
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	6	0	0 -100	4	0	0 - 99
Musculoskeletal/Skin Conditions	5	0	0 -100	7	0	0 - 99
Neuropsychiatric/Sensory Disease	5	0	0 -100	2	0	0 -100
Urologic Disease	1	0	0 -100	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	56
Occupancy Rate (%):	7
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	5
Percent of Physicians Who Are Board Certified Specialists:	20
Interns and Residents:	0
Registered Nurses:	8
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

OTSEGO COUNTY MEM HOSP

825 N CENTER ST
GAYLORD, MI 49735

Medicare Hospital Provider Number: 230133

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	499	12	9 - 16	481	12	8 - 15
Cancer	7	71	17 - 78	12	67	26 - 77
Cerebrovascular Accidents	13	23	9 - 56	18	17	8 - 46
Gastrointestinal Catastrophes	7	43	7 - 73	3	0	1 - 85
Infectious Disease	9	22	12 - 66	1	0	1 - 97
Metabolic/Electrolyte Disorders	4	25	2 - 81	4	0	2 - 73
Pulmonary Disease	34	35	13 - 46	31	26	11 - 44
Renal Failure	3	0	1 - 83	2	0	4 - 89
Severe Acute Heart Disease	33	21	24 - 54	23	30	21 - 58
Severe Chronic Heart Disease	31	29	12 - 44	30	33	13 - 47
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	37	3	0 - 31	51	4	0 - 27
Gynecologic Disease	11	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	49	2	0 - 20	46	4	0 - 33
Musculoskeletal/Skin Conditions	40	0	0 - 27	51	4	0 - 29
Neuropsychiatric/Sensory Disease	19	5	0 -100	17	0	0 - 64
Urologic Disease	40	0	0 - 42	35	0	0 - 68

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	111
Occupancy Rate (%):	58
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	30
Percent of Physicians Who Are Board Certified Specialists:	57
Interns and Residents:	0
Registered Nurses:	35
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

OUTER DR HOSP

26400 OUTER DR
LINCOLN PARK, MI 48146

Medicare Hospital Provider Number: 230140

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	893	11	9 - 14	851	13	9 - 15
Cancer	11	45	24 - 78	14	64	22 - 70
Cerebrovascular Accidents	42	26	15 - 42	54	20	17 - 40
Gastrointestinal Catastrophes	10	40	13 - 70	8	38	7 - 69
Infectious Disease	16	31	15 - 61	14	36	14 - 63
Metabolic/Electrolyte Disorders	22	9	10 - 43	13	15	9 - 54
Pulmonary Disease	30	13	11 - 39	41	34	9 - 40
Renal Failure	6	33	11 - 81	6	17	7 - 75
Severe Acute Heart Disease	30	70	24 - 58	46	57	26 - 56
Severe Chronic Heart Disease	89	20	14 - 33	59	15	13 - 33
Severe Trauma	0	-	-	1	100	2 - 97
Gastrointestinal Disease	86	1	1 - 9	57	4	0 - 22
Gynecologic Disease	3	0	0 -100	0	-	-
Low-Risk Heart Disease	168	1	1 - 6	196	4	1 - 8
Musculoskeletal/Skin Conditions	52	4	0 - 50	45	4	0 - 49
Neuropsychiatric/Sensory Disease	54	2	0 - 29	24	0	0 - 64
Urologic Disease	22	0	0 - 81	32	3	0 - 72

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	218
Occupancy Rate (%):	38
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	100
Percent of Physicians Who Are Board Certified Specialists:	45
Interns and Residents:	0
Registered Nurses:	133
Licensed Practical Nurses:	33

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Medicare Provider No. 230140

PCHA OUTER DRIVE HOSPITAL UNIT OF PEOPLES COMMUNITY HOSPITAL AUTHORITY

OLIVER G. CRUMP, *ADMINISTRATOR* • 26400 OUTER DRIVE, LINCOLN PARK, MICHIGAN 48146 • (313) 594-6000

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WOODHAVEN

YPSILANTI

TOWNSHIPS OF

HURON

SUMPTER

SUPERIOR

VAN BUREN

YPSILANTI

October 13, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows Building
5325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

The 1987 mortality data for Outer Drive Hospital has been reviewed by members of the medical staff. All diagnostic categories with the exception of Severe Acute Heart Disease were within the HCFA ranges for predicted mortality.

For the category of Severe Acute Heart Disease, HCFA data disclosed that out of 30 cases, there were 21 deaths for a mortality rate of 70%. The predicted range was 24 to 58%. We wish to make the following comments:

(1) The average age of mortality in this diagnostic group was 76 years of age. In grouping the patients further, the following was noted:

Less than 65 years	1 death
65 to 69 years	2 deaths
70 to 74 years	6 deaths
75 to 79 years	7 deaths
over 80 years	5 deaths

57.1% of the deaths occurred in an age group of 75 years or older.

(2) Thirteen of the 21 deaths (61.9%) occurred within 48 hours or less following admission, supporting the presence of severe acuity of illness.

(3) Data specific to Outer Drive Hospital prepared by the Michigan Hospital Association, indicated that 77% of the mortalities in this category had at least one comorbidity present.

(4) Four of the 21 deaths (19%) occurred after the patient's discharge from the hospital. Had these cases been excluded, the mortality rate would have been significantly lower. Chart review disclosed no evidence of premature discharge.

(5) There is a discrepancy in the listing of Speciality Services. Outer Drive Hospital does maintain a coronary care unit.

(6) Mortality Review is routinely conducted by the clinical departments of the medical staff. There were no quality issues identified in that review process.

(7) The Medical Staff concluded that the reported mortality rate for this category is not aberrant. These patients represent an acutely ill, elderly portion of a lower than average socio-economic background, predominately with the presence of one or more comorbid disease processes.

Sincerely,

David L. Hoff
Administrator

/kv

PAUL OLIVER MEM HOSP

224 PARK AVE
FRANKFORT, MI 49635

Medicare Hospital Provider Number: 230062

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	268	12	8 - 16	277	13	7 - 16
Cancer	4	50	13 - 88	5	60	8 - 79
Cerebrovascular Accidents	14	29	8 - 55	14	36	6 - 56
Gastrointestinal Catastrophes	1	100	3 - 98	2	0	2 - 89
Infectious Disease	3	0	2 - 80	3	0	2 - 80
Metabolic/Electrolyte Disorders	8	25	1 - 71	2	0	3 - 88
Pulmonary Disease	19	11	11 - 43	7	43	5 - 71
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	12	33	18 - 68	15	20	21 - 62
Severe Chronic Heart Disease	13	23	7 - 54	11	27	7 - 59
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	25	0	0 - 27	32	3	0 - 36
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	34	6	0 - 37	33	6	1 - 28
Musculoskeletal/Skin Conditions	30	3	1 - 28	30	0	0 - 32
Neuropsychiatric/Sensory Disease	6	0	0 -100	10	10	0 -100
Urologic Disease	5	0	0 -100	6	17	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	48
Occupancy Rate (%):	35
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	15
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	13
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PAWATING HOSPITAL

31 NORTH ST JOSEPH
NILES, MI 49120

Medicare Hospital Provider Number: 230137

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,118	15	9 - 15	1,096	14	9 - 15
Cancer	23	78	23 - 59	21	62	23 - 64
Cerebrovascular Accidents	37	27	17 - 47	39	36	16 - 47
Gastrointestinal Catastrophes	7	57	11 - 75	11	36	14 - 68
Infectious Disease	18	33	14 - 58	11	45	15 - 70
Metabolic/Electrolyte Disorders	19	26	8 - 51	22	9	7 - 40
Pulmonary Disease	84	27	14 - 36	63	30	17 - 42
Renal Failure	7	86	25 - 88	6	67	18 - 89
Severe Acute Heart Disease	28	68	28 - 62	34	47	25 - 59
Severe Chronic Heart Disease	78	22	13 - 33	69	29	15 - 38
Severe Trauma	0	-	-	1	0	1 - 97
Gastrointestinal Disease	100	3	0 - 12	74	0	1 - 8
Gynecologic Disease	10	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	110	5	1 - 13	125	3	1 - 9
Musculoskeletal/Skin Conditions	98	1	1 - 8	110	4	1 - 11
Neuropsychiatric/Sensory Disease	17	0	0 - 70	20	5	0 - 94
Urologic Disease	58	9	0 - 63	46	0	0 - 24

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	106
Occupancy Rate (%):	48
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	42
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	88
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PAWATING HOSPITAL

Pawating Hospital
Response to HCFA Mortality Statistics
October 20, 1988

When Pawating Hospital received their 1987 Mortality Statistics, it was noted that the Hospital was within the predicted range for all causes and within the predicted range for 14 of the 16 categories. In the two categories that Pawating Hospital exceeded the predicted ranges, cancer and severe acute heart disease, the Hospital reviewed 100% of the cases. From the review, data was collected and analyzed to see if any quality concerns could be identified.

Statistics received from HCFA for the cancer category were compared with last year's mortality statistics to see if a large variance was evident. It was noted that in actuality, Pawating Hospital had one death less in this category than in the 1986 patient death listing. Further study of the cancer deaths revealed that all 18 patients in the 1987 mortality statistics were patients with multiple diagnoses. Therefore, in addition to their cancer diagnoses, they had other diagnoses such as diabetes mellitus, heart disease, previous strokes and so forth. The 18 patients who expired were terminally ill patients. This is supported by the fact that all 18 patients had "No Code" orders which demonstrates the patient's and family wishes that life not be prolonged by resuscitation and extraordinary measures. In conclusion, the cancer patients that expired were in the last stages of their illness and not expected to survive.

In reviewing the mortality statistics in the severe acute heart disease category, it was noted that 19 patients expired within 30 days of their last admission in 1987. Eighteen of the patients died in Pawating Hospital which is indicative of their serious, acute condition. Fifteen of the patients who expired had a final diagnosis of acute myocardial infarction. Of interest, 11 of the 19 patients had previous myocardial infarctions which shows that the majority of these patients had a history of serious heart disease. In all of these cases, the patients had multiple diagnoses. Examples of these diagnoses include other chronic heart disease, diabetes mellitus, respiratory diseases and so forth.

The multiple diagnoses can add to the severity of the patient's condition. Ten of the patients had "No Code" orders which indicates that the patients and their family had requested no resuscitation or extraordinary measures to prolong their lives. As part of the Quality Assurance program, deaths at Pawating Hospital are reviewed unless the patient is in the end stage of terminal cancer. This death review has not identified any quality concerns regarding patients with severe acute heart disease. In addition, the severe acute heart disease cases reviewed by the state peer review organization concerning the 19 deaths did not reveal quality of care concerns.

In conclusion, after a thorough review of the cases involved in these two categories in which Pawating Hospital exceeded the predicted mortality range, no quality concerns have been identified.

31 N. St. Joseph Avenue/Niles, Michigan 49120/(616) 683-5510

PENNOCK HOSPITAL

1009 W GREEN ST
HASTINGS, MI 49058

Medicare Hospital Provider Number: 230040

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	711	12	10 - 15	796	11	9 - 15
Cancer	16	31	20 - 65	21	52	23 - 65
Cerebrovascular Accidents	25	24	14 - 49	27	19	13 - 44
Gastrointestinal Catastrophes	10	30	14 - 68	4	25	5 - 80
Infectious Disease	12	42	19 - 71	7	43	10 - 75
Metabolic/Electrolyte Disorders	10	20	6 - 60	8	13	6 - 61
Pulmonary Disease	56	21	13 - 37	67	10	15 - 34
Renal Failure	1	0	3 - 99	0	-	-
Severe Acute Heart Disease	30	37	25 - 60	31	45	25 - 60
Severe Chronic Heart Disease	35	11	11 - 35	37	5	14 - 32
Severe Trauma	0	-	-	2	50	2 - 92
Gastrointestinal Disease	56	7	0 - 29	71	1	1 - 11
Gynecologic Disease	14	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	74	3	1 - 13	90	7	1 - 15
Musculoskeletal/Skin Conditions	63	0	0 - 10	85	0	1 - 7
Neuropsychiatric/Sensory Disease	13	8	0 - 88	12	8	0 - 98
Urologic Disease	41	2	0 - 25	49	0	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	92
Occupancy Rate (%):	47
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	38
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	0
Registered Nurses:	65
Licensed Practical Nurses:	22

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PIPP COMMUNITY HOSP

411 NAOMU ST
PLAINWELL, MI 49080

Medicare Hospital Provider Number: 230134

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	254	13	9 - 18	273	13	7 - 16
Cancer	9	44	13 - 72	3	100	14 - 87
Cerebrovascular Accidents	10	30	6 - 62	9	44	7 - 66
Gastrointestinal Catastrophes	3	0	1 - 82	2	50	1 - 94
Infectious Disease	1	0	0 - 97	2	50	3 - 92
Metabolic/Electrolyte Disorders	3	0	1 - 83	4	0	5 - 71
Pulmonary Disease	37	32	10 - 42	23	39	7 - 48
Renal Failure	1	100	1 - 97	0	-	-
Severe Acute Heart Disease	13	15	20 - 62	5	40	5 - 77
Severe Chronic Heart Disease	15	33	7 - 54	28	29	8 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	21	0	1 - 27	17	0	0 - 59
Gynecologic Disease	2	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	19	0	0 - 60	23	4	0 - 89
Musculoskeletal/Skin Conditions	13	0	0 - 96	19	0	0 - 76
Neuropsychiatric/Sensory Disease	2	0	0 -100	3	0	0 -100
Urologic Disease	19	0	0 -100	17	0	0 - 89

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	43
Occupancy Rate (%):	26
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	10
Percent of Physicians Who Are Board Certified Specialists:	90
Interns and Residents:	0
Registered Nurses:	18
Licensed Practical Nurses:	23

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PONTIAC GENERAL HOSPITAL

SEMINOLE AT WEST HURON
PONTIAC, MI 48053

Medicare Hospital Provider Number: 230013

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,343	14	11 - 16	1,550	14	12 - 17
Cancer	49	35	29 - 58	63	40	31 - 59
Cerebrovascular Accidents	51	37	14 - 41	62	24	17 - 40
Gastrointestinal Catastrophes	12	25	7 - 58	16	31	12 - 59
Infectious Disease	20	55	20 - 64	26	50	18 - 58
Metabolic/Electrolyte Disorders	24	29	11 - 51	27	37	16 - 55
Pulmonary Disease	84	26	19 - 41	106	20	16 - 35
Renal Failure	6	17	9 - 76	8	75	16 - 81
Severe Acute Heart Disease	43	37	25 - 55	53	45	26 - 54
Severe Chronic Heart Disease	86	23	16 - 35	114	22	17 - 34
Severe Trauma	0	-	-	3	0	7 - 81
Gastrointestinal Disease	84	2	1 - 11	100	1	1 - 8
Gynecologic Disease	24	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	200	5	2 - 9	229	3	2 - 7
Musculoskeletal/Skin Conditions	76	3	0 - 14	69	3	1 - 13
Neuropsychiatric/Sensory Disease	28	4	0 - 62	60	3	0 - 34
Urologic Disease	46	2	0 - 22	44	2	0 - 22

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	302
Occupancy Rate (%):	63
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	227
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	0
Registered Nurses:	250
Licensed Practical Nurses:	75

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

PGH Pontiac General Hospital

Seminole at West Huron
Pontiac, Michigan 48053
Telephone (313) 857-7200
James Wright, President

Ambulatory Care Center of Waterford
1305 North Oakland Boulevard
Pontiac, Michigan 48054
Telephone (313) 666-9000

Pontiac Health Care Center
132 Franklin Boulevard
Pontiac, Michigan 48053
Telephone (313) 333-3373

Medicare Provider #230013

uctober 20, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

We have reviewed the Medicare Hospital Mortality Information that you provided Pontiac General Hospital on September 15, 1988. I am pleased that in 1987, as in 1986, Pontiac General Hospital's actual mortality rate of our Medicare patients fell well within the range for predicted mortality. In addition, when comparing 1987 to 1986 rates, Pontiac General Hospital decreased its actual mortality rate for many diagnostic categories.

We continually strive to improve the level of quality care offered at Pontiac General Hospital to all of our patients. However, several factors specific to our Medicare patient population present some unique challenges:

1. Pontiac General Hospital is a Regional Radiation Therapy Referral Center. As such, many of our Medicare patients who have been diagnosed with cancer are referred to Pontiac General Hospital only after alternate treatment modalities have failed. They are considered terminal and Pontiac General Hospital is their last hope.

2. Greater than 16% of our Medicare discharges were transferrees from local nursing homes. They respresent the frail and chronically ill elderly.

3. Many of our Medicare patients have more than one illness when they are admitted to Pontiac General Hospital. Nearly 65% of our Medicare patients present with more than one disease. Treatment is more complicated and the chances for a recovery are decreased.

It is the goal of the medical staff and administration of Pontiac General Hospital to provide quality care for all.

Sincerely,

James Wright
President

PONTIAC OSTEOPATHIC HOSPITAL

50 NORTH PERRY
PONTIAC, MI 48058

Medicare Hospital Provider Number: 230207

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,103	15	9 - 14	1,189	14	9 - 15
Cancer	20	40	23 - 65	25	32	23 - 61
Cerebrovascular Accidents	32	44	13 - 48	38	29	13 - 43
Gastrointestinal Catastrophes	9	56	12 - 71	4	25	2 - 81
Infectious Disease	18	44	14 - 60	10	20	14 - 65
Metabolic/Electrolyte Disorders	29	38	13 - 51	25	24	8 - 46
Pulmonary Disease	61	33	13 - 39	67	28	15 - 39
Renal Failure	5	40	6 - 81	5	60	6 - 82
Severe Acute Heart Disease	35	57	22 - 56	49	59	27 - 55
Severe Chronic Heart Disease	71	30	15 - 37	89	34	16 - 37
Severe Trauma	5	40	5 - 78	4	25	7 - 81
Gastrointestinal Disease	77	0	1 - 7	89	6	0 - 18
Gynecologic Disease	3	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	185	2	1 - 6	193	3	1 - 8
Musculoskeletal/Skin Conditions	124	2	1 - 8	98	2	0 - 11
Neuropsychiatric/Sensory Disease	26	0	0 - 49	26	0	0 - 81
Urologic Disease	44	0	0 - 22	46	7	0 - 36

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	275
Occupancy Rate (%):	54
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	93
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	49
Registered Nurses:	179
Licensed Practical Nurses:	75

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PORT HURON HOSPITAL

1001 KEARNEY STREET
PORT HURON, MI 48060

Medicare Hospital Provider Number: 230216

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,831	9	8 - 12	1,732	11	9 - 13
Cancer	47	49	27 - 58	47	43	26 - 56
Cerebrovascular Accidents	70	23	16 - 37	81	33	19 - 41
Gastrointestinal Catastrophes	18	17	18 - 57	9	56	15 - 74
Infectious Disease	6	17	11 - 72	7	57	14 - 78
Metabolic/Electrolyte Disorders	32	28	14 - 49	38	39	12 - 47
Pulmonary Disease	56	18	15 - 38	80	17	14 - 34
Renal Failure	3	100	11 - 86	5	60	8 - 83
Severe Acute Heart Disease	60	33	23 - 49	64	42	23 - 49
Severe Chronic Heart Disease	71	28	12 - 34	86	31	14 - 35
Severe Trauma	0	-	-	3	33	2 - 86
Gastrointestinal Disease	142	1	1 - 6	125	2	1 - 8
Gynecologic Disease	23	0	0 -100	22	0	0 -100
Low-Risk Heart Disease	307	3	2 - 6	273	2	2 - 6
Musculoskeletal/Skin Conditions	276	1	1 - 5	243	0	1 - 4
Neuropsychiatric/Sensory Disease	63	0	0 - 11	60	5	0 - 24
Urologic Disease	48	0	0 - 22	57	2	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	253
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	121
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	0
Registered Nurses:	203
Licensed Practical Nurses:	71

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

HCFA RESPONSE

Port Huron Hospital is a **264-bed** acute care, community hospital serving St. Clair and Sanilac counties in the thumb area of Michigan. Services include medical-surgical, orthopedic, emergency, perinatal family, mental health, chemical dependence, inpatient and outpatient surgery, pediatrics and intensive care/ selective care. Although we do not have a dedicated coronary care unit, we are equipped to treat both acute and chronic heart disease, as the mortality data reveals.

Upon review of the Health Care Financing Administration data for Port Huron Hospital, we note that our overall mortality rate fell well within the predicted range. We also fell within the predicted range in 16 of the 17 categories, Renal Failure excepted. The small sample size in this category (3 total cases) rendered it statistically insignificant. There also are errors in the HCFA data, none of which will change our mortality rates significantly, but should be mentioned:

o In One case, **the patient was transferred to an acute care facility**, and should not be included in our data.

o In four cases, **the patients actually died while in the hospital, rather than after discharge**, as reported by HCFA.

We will utilize HCFA data to identify areas for more extensive review by our Quality Assurance Committee. HCFA data does **not**, however, identify areas in which the hospital

provides "high quality" or "low quality" care, nor does it measure hospital performance. A mortality rate higher than predicted does not confirm the existence of quality problems, just as a mortality rate lower than predicted does not establish that the hospital provides high quality care.

Our hospital had a relatively small number of cases in many of the HCFA defined categories (as mentioned for Renal Failure category). In **12 of the 17 defined categories we had less than 100 case**s--which decreases the reliability of the data. Also, it must be remembered that HCFA data reflects only Medicare Patients and does not reveal overall mortality rates for 1987, and the patients included in this study had an average age of 77 years.

The Quality Assurance Committee at Port Huron Hospital will continue to do in-depth evaluation of this data, along with its ongoing review of mortality.

PORTAGE VIEW HOSPITAL

200-210 MICHIGAN STREET
HANCOCK, MI 49930

Medicare Hospital Provider Number: 230108

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	493	9	9 - 15	520	13	10 - 16
Cancer	13	38	26 - 76	9	67	19 - 76
Cerebrovascular Accidents	25	20	12 - 45	28	39	14 - 50
Gastrointestinal Catastrophes	3	33	9 - 90	5	40	7 - 79
Infectious Disease	8	25	14 - 72	4	25	5 - 80
Metabolic/Electrolyte Disorders	4	25	2 - 81	3	67	2 - 86
Pulmonary Disease	29	28	12 - 46	28	11	13 - 40
Renal Failure	2	50	6 - 95	2	100	8 - 93
Severe Acute Heart Disease	14	36	16 - 64	25	48	22 - 61
Severe Chronic Heart Disease	34	12	13 - 37	37	22	11 - 39
Severe Trauma	1	0	2 - 97	0	-	-
Gastrointestinal Disease	25	0	0 - 63	43	5	0 - 30
Gynecologic Disease	6	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	63	2	1 - 12	48	2	1 - 17
Musculoskeletal/Skin Conditions	53	2	0 - 18	40	0	0 - 19
Neuropsychiatric/Sensory Disease	19	0	0 - 50	22	0	0 - 59
Urologic Disease	39	3	0 - 90	22	0	0 - 69

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	85
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	23
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	0
Registered Nurses:	47
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PROVIDENCE HOSP

16001 W NINE MILE RD
SOUTHFIELD, MI 48037

Medicare Hospital Provider Number: 230019

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,719	12	11 - 15	3,805	12	11 - 15
Cancer	193	39	32 - 51	159	33	30 - 50
Cerebrovascular Accidents	124	11	19 - 32	140	20	18 - 34
Gastrointestinal Catastrophes	19	26	16 - 58	22	36	17 - 59
Infectious Disease	55	38	27 - 57	53	36	24 - 54
Metabolic/Electrolyte Disorders	46	24	13 - 43	54	26	14 - 43
Pulmonary Disease	206	29	20 - 36	196	26	19 - 35
Renal Failure	18	28	19 - 73	18	39	17 - 73
Severe Acute Heart Disease	166	39	30 - 48	213	38	32 - 49
Severe Chronic Heart Disease	189	30	16 - 31	217	24	17 - 31
Severe Trauma	6	17	4 - 70	3	67	2 - 87
Gastrointestinal Disease	216	4	1 - 8	275	2	1 - 6
Gynecologic Disease	29	0	0 - 92	40	0	0 -100
Low-Risk Heart Disease	664	4	2 - 5	578	4	2 - 5
Musculoskeletal/Skin Conditions	295	1	1 - 5	267	2	1 - 6
Neuropsychiatric/Sensory Disease	186	2	1 - 7	196	1	1 - 5
Urologic Disease	126	1	0 - 8	117	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	457
Occupancy Rate (%):	85
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	407
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	99
Registered Nurses:	539
Licensed Practical Nurses:	18

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

PROVIDENCE HOSPITAL
16001 WEST NINE MILE ROAD
P.O. BOX 2043
SOUTHFIELD, MICHIGAN 48037
313 424-3000

October 21, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health and Human Services
Washington, D.C. 20201

Dear Dr. Roper:

Providence Hospital has received the new mortality statistics for 1987 and has reviewed the underlying data. While some discrepancies relative to the discharge date or date of death were noted in your data set, it is of much more concern that again no allowances were made for severity of illness or other socio-economic factors. We believe that large urban teaching hospitals, of which Providence is one, are greatly impacted by those very factors not included in the mathematical extrapolations in your morbidity statistics. We feel that factors such as severity of illness, environmental circumstances contributing to death after discharge (i.e. poor nursing home or home care), and the inaccuracies resulting from reporting of deaths under the principal diagnosis which may obscure the exact cause of death, need to be better adjusted for in order to provide valuable data. Furthermore, we believe that any review of hospital specific mortality rates must be made in concert with the role that an institution plays in providing total health-care to its service area. The present methodology used to arrive at your mortality statistics, although improved over prior years, still only provides crude data and should in no way be used to judge quality of care in a hospital.

Providence Hospital, a 462 bed acute-care teaching hospital, is located in the Southeastern part of Oakland County. The service area is characterized as highly industrialized with diverse ethnic groups living within close proximity of the Hospital campus. The hospital's primary service area of Southfield from which about 20% of patients come is characterized by a much larger proportion of older adults (16.2%) to total population than the rest of the State of Michigan (11%). Because Providence is a teaching institution, many of our patients come here as a last means, after several other hospitalizations. These patients often suffer from multi-system deterioriization and have an extremely poor outcome prognosis. 83% of the patients who expired at Providence entered the hospital with an emergency condition and about 50% of the patients required a high level of care found only in intensive care or cardiac care units.

It is important to note that the average age at death for all Medicare patients was significantly above the average U.S. life expectancy norms. Furthermore, 83% of the patients who expired at Providence entered the hospital with an emergency condition.

Providence Hospital operates an active Emergency Department, the largest in its primary service area treating approximately 43,000 patients each year. About 40% of our inpatient population is admitted through the Emergency Room.

Quality of care is of utmost importance to Providence Hospital's governing board, management and medical staff. To assure a high quality of service to our patients, the hospital has established a comprehensive quality assurance program which monitors all morbidity and mortality issues on an ongoing basis. All potential quality issues are reviewed by physicians, nurses and other appropriate health-care professionals, corrective actions, if appropriate, are taken and outcomes are monitered and reported to the Board of Trustees. All individual deaths are reviewed by a medical staff committee as part of the quality assurance process. Providence has an active medical staff of 420 physicians of which 70% are board certified.

Although we feel that the mortality statistics developed by HCFA are crude and do not provide an accurate and valid measure of the quality of care provided by a hospital, Providence acknowledges that it does represent additional data to further evaluate patient care as well as physician practice patterns. Providence Hospital will utilize these data in its continuing effort to enhance the quality of patient care.

Sincerely,

Brian M. Connolly
President

Joseph Rinaldo, M.D.
Medical Director

CE:ET1021

REDFORD COMMUNITY HOSPITAL

25210 GRAND RIVER AVE
REDFORD, MI 48240

Medicare Hospital Provider Number: 230084

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	277	17	8 - 18	345	20	10 - 19
Cancer	3	0	7 - 80	6	67	17 - 82
Cerebrovascular Accidents	13	46	10 - 61	12	42	8 - 61
Gastrointestinal Catastrophes	3	67	2 - 86	4	75	10 - 83
Infectious Disease	3	67	2 - 86	2	50	7 - 96
Metabolic/Electrolyte Disorders	8	13	5 - 61	11	45	7 - 64
Pulmonary Disease	13	62	9 - 60	19	47	13 - 56
Renal Failure	1	0	1 - 97	5	60	16 - 91
Severe Acute Heart Disease	7	0	20 - 65	15	60	18 - 65
Severe Chronic Heart Disease	19	26	9 - 49	18	28	10 - 51
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	13	15	0 - 83	20	0	0 - 36
Gynecologic Disease	2	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	34	9	0 - 52	37	3	0 - 26
Musculoskeletal/Skin Conditions	28	0	0 - 61	41	5	0 - 40
Neuropsychiatric/Sensory Disease	11	0	0 - 68	9	0	0 - 99
Urologic Disease	6	17	0 - 93	11	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	68
Occupancy Rate (%):	29
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	46
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	0
Registered Nurses:	31
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

REDFORD COMMUNITY HOSPITAL

25210 GRAND RIVER AVENUE
REDFORD, MICHIGAN 48240-1499
(313) 531-6200

October 18, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

COMMENTS ON THE HCFA MORTALITY DATA

Redford Community Hospital's actual mortality rate is within the range of the predicted mortality rate.

Pulmonary Disease is the only category in which we have exceeded the anticipated rate. We have reviewed the medical records in each of these cases. Findings indicate that of the eight (8) expired patients in this category fifty percent (50%) were admitted in a non-responsive state, all were from Nursing Homes with the average age being 79 years. All had "Do Not Resusitate" requests signed by the family. Further, each of these cases serious comorbid conditions existed, (ie: Septic Shock, Respiratory Arrest on Admission, Uncontrolled Diabetes Mellitus). Serious comorbid conditions also were present in the other patients (ie: Cancer with metastasis, Acute CVA, Tube Feeding Aspiration, Pulmonary Edema with Delirium Tremens).

The overview of all other categories indicated that patients had serious illness with grave prognosis on admission. As has been our experience in the past, over eighty percent (80%) are admitted through the Emergency Room. Several patients showed evidence of metastatic malignancy, although this was not the diagnosis that brought them to the hospital or for which they received treatment it had been responsible for the patients debilitated condition.

In addition, we are in the service area of numerous Nursing Homes, as well as serving the Northwest Detroit area from which we receive an aging population with histories of serious multiple illnesses.

After review of all deaths in HCFA study no major quality care items were identified. We feel the statistics do not give a true reflection of the Quality of Care rendered.

Thank you for the opportunity to express our comments on the HCFA Mortality Data for Redford Community Hospital.

Alexander Pogrebniak, M.D.
Alexander Pogrebniak, M.D.
Medical Director

AP/clr

REED CITY HOSPITAL

7665 PATTERSON RD
REED CITY, MI 49677

Medicare Hospital Provider Number: 230086

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	453	11	9 - 16	433	13	10 - 17
Cancer	11	82	25 - 72	12	67	17 - 68
Cerebrovascular Accidents	23	17	14 - 47	23	17	16 - 49
Gastrointestinal Catastrophes	3	33	1 - 90	1	100	2 - 97
Infectious Disease	6	0	10 - 61	6	17	4 - 69
Metabolic/Electrolyte Disorders	3	0	1 - 83	3	33	6 - 87
Pulmonary Disease	41	20	15 - 42	50	18	16 - 40
Renal Failure	2	0	1 - 91	2	50	3 - 93
Severe Acute Heart Disease	21	33	19 - 59	22	32	21 - 60
Severe Chronic Heart Disease	28	29	9 - 43	26	19	9 - 41
Severe Trauma	1	0	1 - 97	2	0	0 - 92
Gastrointestinal Disease	49	0	1 - 12	47	6	0 - 45
Gynecologic Disease	4	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	78	1	1 - 9	65	5	0 - 19
Musculoskeletal/Skin Conditions	33	6	0 - 69	38	5	0 - 58
Neuropsychiatric/Sensory Disease	8	0	0 - 99	8	0	1 - 54
Urologic Disease	5	20	0 -100	4	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	110
Occupancy Rate (%):	67
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	12
Percent of Physicians Who Are Board Certified Specialists:	33
Interns and Residents:	0
Registered Nurses:	31
Licensed Practical Nurses:	32

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

RIVER DISTRICT HOSPITAL

4100 SOUTH RIVER ROAD
SAINT CLAIR, MI 48079

Medicare Hospital Provider Number: 230241

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	632	14	9 - 16	651	16	10 - 16
Cancer	9	100	29 - 67	15	53	16 - 64
Cerebrovascular Accidents	16	56	10 - 57	20	35	12 - 53
Gastrointestinal Catastrophes	3	33	4 - 86	11	82	16 - 65
Infectious Disease	5	40	11 - 81	5	60	6 - 78
Metabolic/Electrolyte Disorders	19	21	8 - 49	18	28	9 - 53
Pulmonary Disease	27	37	12 - 49	45	33	18 - 47
Renal Failure	2	0	8 - 92	0	-	-
Severe Acute Heart Disease	35	37	23 - 56	22	23	17 - 53
Severe Chronic Heart Disease	41	29	13 - 42	44	32	13 - 41
Severe Trauma	1	0	1 - 97	0	-	-
Gastrointestinal Disease	46	4	0 - 26	48	4	0 - 22
Gynecologic Disease	8	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	98	2	2 - 9	107	4	1 - 11
Musculoskeletal/Skin Conditions	41	7	0 - 54	37	5	0 - 43
Neuropsychiatric/Sensory Disease	10	0	0 -100	16	0	0 - 89
Urologic Disease	30	0	0 - 28	33	0	0 - 52

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	68
Occupancy Rate (%):	52
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	51
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	54
Licensed Practical Nurses:	30

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

STATEMENT CONCERNING HCFA MORTALITY RATES
FOR RIVER DISTRICT HOSPITAL
Provider No. 23-0241

Part of River District Hospital's quality assurance program is to review any patient death that occurred in the hospital. These reviews which are done by staff physicians who were not involved with the patient's care are done to ensure that appropriate, quality care was provided to these patients. If any problem is noted corrective action is taken to prevent any future reoccurrence. Mortality review is a small part of the hospital's quality assurance program which includes monitoring of infection rates, drug usage, surgical case review and a number of other quality assurance indicators.

By using our quality assurance data we have verified the HCFA mortality list provided to us. It is interesting to note that 92 percent of the patients listed by HCFA were documented as "no codes". This means that the patient or the patient's family had asked the hospital and physician to take no heroic measures to keep the patient alive. The treatment in these cases where death is expected is of a palliative nature designed to keep the patient comfortable. The remaining 8 percent not documented as "no code" were acutely ill patients admitted through our Emergency Room.

In addition, 77% of these no code cases were patients who were acutely ill and admitted through the hospital's Emergency Room.

River District Hospital is proud of the quality care it provides its patients. The hospital continues to maintain its accreditation by the Joint Commission on Accreditation of Healthcare Organizations and remains licensed by the Michigan Department of Public Health.

William B. Leaver
Administrator

Kenneth Bollin, M.D.
Chief of Staff

RIVERSIDE OSTEOPATHIC HOSPITAL

150 TRUAX STREET
TRENTON, MI 48183

Medicare Hospital Provider Number: 230169

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,071	17	10 - 15	1,192	16	9 - 15
Cancer	37	49	25 - 58	34	44	22 - 57
Cerebrovascular Accidents	41	22	13 - 40	42	29	16 - 44
Gastrointestinal Catastrophes	10	30	12 - 67	15	47	14 - 64
Infectious Disease	27	48	18 - 57	12	42	11 - 64
Metabolic/Electrolyte Disorders	19	37	9 - 55	16	31	6 - 54
Pulmonary Disease	54	41	14 - 42	55	42	11 - 39
Renal Failure	6	50	11 - 82	3	67	4 - 88
Severe Acute Heart Disease	48	38	27 - 56	64	44	27 - 52
Severe Chronic Heart Disease	63	27	13 - 36	81	21	14 - 33
Severe Trauma	1	100	1 - 97	1	0	0 - 98
Gastrointestinal Disease	83	6	0 - 20	88	1	1 - 9
Gynecologic Disease	5	0	0 -100	19	5	0 - 54
Low-Risk Heart Disease	116	4	0 - 13	144	9	1 - 14
Musculoskeletal/Skin Conditions	118	3	0 - 12	128	4	0 - 15
Neuropsychiatric/Sensory Disease	27	4	0 - 63	44	0	0 - 35
Urologic Disease	72	6	0 - 29	57	5	0 - 52

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	188
Occupancy Rate (%):	55
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	94
Percent of Physicians Who Are Board Certified Specialists:	48
Interns and Residents:	21
Registered Nurses:	100
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Riverside Osteopathic Hospital
AN AFFILIATE OF HORIZON HEALTH SYSTEMS

October 21, 1988

Mr. Thomas Morford, Director
Health Care Financing Administration
Health Standards & Quality Bureau
Hospital Mortality Information
P.O. Box 26684
Baltimore, Maryland 21207

Dear Mr. Morford:

The administration of Riverside Osteopathic Hospital has reviewed the results of the Health Care Finance Administration's study of 1987 Medical Hospital Mortality Information. After closely examining the cases involved and the results of the study, we have come to the following conclusions:

-Although the Health Care Finance Administration made some adjustments to the 1987 statistical model to include age and up to four comorbid conditions, and revised the diagnostic categories, it is still incapable of adequately measuring severity of illness.

-The statistical model disregards the total number of live Medicare discharges at a hospital and focuses only on deaths and last discharges.

-The model does not take into consideration that those deaths which occur outside the hospital may be the result of an act or condition totally related to the patient's last hospital admission.

-Other factors of hospital care, such as nosocomial infection rates, are considered to be more reliable measurements of quality of care than death. Riverside's nosocomial infection rate is well within the limits stated in the Federal Register.

-Fourteen percent of Riverside's Medicare patients are 85 years of age or older. The vast majority of these patients are transferred to the hospital by nursing homes or skilled care facilities. They arrive in a very terminal state. Treatment of this type of patient, in an advanced stage of disease and age, is most often of a palliative nature rather than a curative. Sixty-four percent of the families have requested no heroic measures are to be taken to sustain life.

-During calendar year 1987, Riverside Osteopathic Hospital treated only one severe trauma Medicare case, who expired. The number of cases, one, lends itself statistically insignificant for the purposes of this study.

-Again we take the stand that this statistical model and the mortality data were developed for use by peer review organizations as a guide for indepth

150 Truax Street
Trenton, Michigan 48183
313-676-4200

studies involving a number of other factors. It is not, nor is it meant to be, a consumer guide to quality of care at hospitals.

Riverside Osteopathic Hospital has an ongoing quality assessment program which includes mortality review by all clinical departments. All cases in which death occurs undergo internal peer review for appropriateness of care and quality of care. Historically, Riverside Osteopathic Hospital has, and will continue, to work cooperatively with the Michigan Peer Review Organization in this effort.

Yours truly,

Dennis A. Christen

Dennis A. Christen
Vice President/Administrator
Riverside Osteopathic Hospital
Hospital Provider #230169

om

ROGERS CITY HOSP

555 N BRADLEY HWY
ROGERS CITY, MI 49779

Medicare Hospital Provider Number: 230014

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	264	10	11 - 19	289	12	9 - 17
Cancer	2	100	6 - 89	4	100	12 - 75
Cerebrovascular Accidents	4	50	6 - 82	9	44	10 - 68
Gastrointestinal Catastrophes	2	50	4 - 93	1	0	1 - 97
Infectious Disease	1	100	1 - 97	4	25	9 - 83
Metabolic/Electrolyte Disorders	6	33	4 - 73	5	0	2 - 67
Pulmonary Disease	25	16	13 - 45	26	15	16 - 47
Renal Failure	7	14	19 - 82	2	50	3 - 93
Severe Acute Heart Disease	19	16	24 - 59	16	44	21 - 67
Severe Chronic Heart Disease	18	28	10 - 52	20	30	9 - 50
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	30	0	2 - 17	28	0	0 - 47
Gynecologic Disease	5	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	43	2	0 - 23	35	3	0 - 35
Musculoskeletal/Skin Conditions	11	0	0 -100	21	5	0 - 64
Neuropsychiatric/Sensory Disease	3	0	0 -100	7	0	0 -100
Urologic Disease	4	0	0 -100	5	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	90
Occupancy Rate (%):	68
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	7
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	19
Licensed Practical Nurses:	16

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

RUSSELL MEMORIAL HOSPITAL

201 N PINE STREET
ONAWAY, MI 49765

Medicare Hospital Provider Number: 230163

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	89	10	7 - 20	146	7	7 - 17
Cancer	1	100	1 -100	2	0	6 - 90
Cerebrovascular Accidents	0	-	-	2	50	1 - 93
Gastrointestinal Catastrophes	0	-	-	1	0	0 -100
Infectious Disease	0	-	-	1	0	1 - 97
Metabolic/Electrolyte Disorders	2	0	0 - 94	2	0	0 - 93
Pulmonary Disease	12	17	5 - 52	22	9	13 - 43
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	7	29	11 - 72	4	50	3 - 82
Severe Chronic Heart Disease	7	43	4 - 71	7	0	7 - 53
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	8	0	0 -100	10	10	0 - 72
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	23	4	0 - 56	52	2	0 - 16
Musculoskeletal/Skin Conditions	7	0	0 -100	3	0	0 -100
Neuropsychiatric/Sensory Disease	1	0	0 -100	7	0	0 -100
Urologic Disease	1	0	0 -100	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	17
Occupancy Rate (%):	41
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	1
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	0
Registered Nurses:	13
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SAGINAW GENERAL HOSPITAL

1447 N HARRISON STREET
SAGINAW, MI 48602

Medicare Hospital Provider Number: 230122

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,552	12	9 - 14	1,714	11	9 - 14
Cancer	62	39	27 - 54	80	24	27 - 50
Cerebrovascular Accidents	54	33	18 - 44	61	16	18 - 39
Gastrointestinal Catastrophes	27	59	21 - 60	11	27	9 - 62
Infectious Disease	7	14	15 - 71	9	33	9 - 68
Metabolic/Electrolyte Disorders	9	33	10 - 68	6	0	2 - 62
Pulmonary Disease	61	26	17 - 41	74	22	13 - 35
Renal Failure	25	28	15 - 66	30	50	17 - 69
Severe Acute Heart Disease	50	50	22 - 51	53	43	28 - 55
Severe Chronic Heart Disease	58	24	13 - 37	85	22	13 - 33
Severe Trauma	1	0	0 - 98	4	25	5 - 81
Gastrointestinal Disease	112	4	0 - 13	132	4	1 - 10
Gynecologic Disease	26	0	0 -100	28	0	0 -100
Low-Risk Heart Disease	190	5	1 - 9	172	2	2 - 7
Musculoskeletal/Skin Conditions	166	1	1 - 6	179	2	0 - 8
Neuropsychiatric/Sensory Disease	126	3	0 - 11	113	4	0 - 18
Urologic Disease	34	0	0 - 27	52	2	0 - 31

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	352
Occupancy Rate (%):	54
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	128
Percent of Physicians Who Are Board Certified Specialists:	74
Interns and Residents:	0
Registered Nurses:	272
Licensed Practical Nurses:	139

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

1447 N. Harrison
Saginaw, MI 48602
517-771-4000



SAGINAW
GENERAL
HOSPITAL

October 21, 1988 Provider Number: 230122

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Saginaw General Hospital wishes to take this opportunity to correct and comment on the 1987 HCFA Mortality Data.

In the Staffing category of the Hospital Characteristics section your data inicates that 53% of our physicians are board certified when actually it is 75%. Your figures indicate that we have 1.24 R.N.'s/bed and .70 L.P.N.'s/bed when the actual figures are .90 R.N.'s/bed and .52 L.P.N.'s/bed. Your data also incicates there are no interns and residents, however; there are .14 interns and residents/bed. Finally in the Speciality Services category of the Hospital Characteristics, Saginaw General Hospital does not have an Organ Transplant Service as the information indicates.

With regard to the actual mortality data one must keep in mind that figures do not indicate individual situations and/or preferences. Nearly 70% of the deaths attributed to Saginaw General Hospital were patients and/or family that requested "No Extraordinary Measures".

Thank you for this opportunity to comment on this information prior to it's release.

Sincerely,

William J. Heath
Executive Vice President

SAINT JOHN HOSP

22101 MOROSS RD
DETROIT, MI 48236

Medicare Hospital Provider Number: 230165

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,035	12	10 - 14	4,105	12	11 - 15
Cancer	202	37	28 - 47	194	34	32 - 51
Cerebrovascular Accidents	135	27	19 - 36	137	27	20 - 37
Gastrointestinal Catastrophes	28	46	21 - 60	40	47	23 - 57
Infectious Disease	27	37	19 - 57	12	42	19 - 72
Metabolic/Electrolyte Disorders	57	30	13 - 42	59	29	12 - 41
Pulmonary Disease	137	29	16 - 35	171	29	18 - 35
Renal Failure	15	33	8 - 66	12	17	13 - 70
Severe Acute Heart Disease	222	29	30 - 46	240	37	33 - 48
Severe Chronic Heart Disease	206	18	17 - 29	198	24	18 - 32
Severe Trauma	4	50	3 - 82	8	25	7 - 67
Gastrointestinal Disease	232	5	1 - 9	228	2	1 - 6
Gynecologic Disease	55	0	0 - 96	52	2	0 - 91
Low-Risk Heart Disease	843	4	2 - 5	919	2	2 - 5
Musculoskeletal/Skin Conditions	295	4	1 - 7	294	1	1 - 5
Neuropsychiatric/Sensory Disease	121	3	0 - 13	74	4	0 - 17
Urologic Disease	143	3	0 - 11	167	0	0 - 5

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	572
Occupancy Rate (%):	85
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	234
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	99
Registered Nurses:	577
Licensed Practical Nurses:	89

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

SALINE COMMUNITY HOSPITAL

400 RUSSELL ST
SALINE, MI 48176

Medicare Hospital Provider Number: 230212

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	451	11	8 - 15	436	11	9 - 16
Cancer	5	20	5 - 74	4	50	8 - 84
Cerebrovascular Accidents	10	0	8 - 43	14	21	7 - 52
Gastrointestinal Catastrophes	3	33	2 - 86	1	0	0 - 99
Infectious Disease	6	83	11 - 72	9	22	12 - 66
Metabolic/Electrolyte Disorders	12	25	4 - 58	14	0	7 - 38
Pulmonary Disease	32	13	14 - 40	29	21	14 - 46
Renal Failure	1	100	1 - 97	2	100	11 - 98
Severe Acute Heart Disease	16	31	17 - 61	24	33	26 - 63
Severe Chronic Heart Disease	28	32	9 - 44	28	18	10 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	46	4	1 - 22	33	6	0 - 71
Gynecologic Disease	4	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	61	5	0 - 23	45	2	1 - 16
Musculoskeletal/Skin Conditions	39	3	0 - 31	28	0	0 - 30
Neuropsychiatric/Sensory Disease	5	0	0 -100	7	0	0 - 98
Urologic Disease	27	0	0 - 49	35	0	0 - 24

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	63
Occupancy Rate (%):	57
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	59
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	61
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SALINE COMMUNITY HOSPITAL
400 West Russell, Saline, Michigan 48176
(313) 429-1500

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Hospital
Provider Number: 230212

Dear Mrs. Kappert,

Saline Community Hospital has received the statistics compiled by the Health Care Finance Administration related to the mortality rates of Medicare patients. The hospital administration and medical staff appreciate the opportunity to review information that enhances our current system of evaluating quality of care.

Data Review:

In reviewing this data, several comments will be helpful:

1) Saline Community Hospital's overall mortality rate for the year was 11%, the same as the previous year. For both years, this was well within HCFA's predicted range.

2) The 1987 data attributed 48 deaths to this hospital, 18 of which occurred after discharge. The 1986 figures were 49 deaths, 17 of which occurred after discharge.

3) The average age of our Medicare patients who died was 83, the same as last year. This is an age when multiple system diseases are frequently present.

4) Renal Failure, Infectious Disease and Severe Chronic Heart Disease are three categories where Saline Community Hospital was at or above range. The following comments address facts and circumstances relating to these categories.

   a) Nine of the 14 patients who died were admitted from an adjacent long-term care facility. The 200 residents of that facility artificially raise the community's

population of older people of fragile health. While families of patients in this long-term care facility draw comfort from knowing medical help is nearby, this proximity does contribute to the possibility of higher mortality rates for Saline Community Hospital.

b) The 5 deaths from 6 cases of Infectious Disease in 1987 show the effect of the hospital being adjacent to a long-term care facility. Four of these 5 patients were from the long-term care facility. These patients' conditions involved overwhelming infections which require acute hospital care.

c) The one case and one death attributed to the hospital in Renal Failure was a patient who died 28 days after admission (3 weeks after discharge) from complications related to cancer of the spinal cord.

d) Four of the 8 patients who died of Severe Chronic Heart Disease were from the adjacent long-term care facility. The average age of these 4 patients was 89 years.

Hospital Characteristics:

In reviewing the hospital characteristics listed, a few facts need to be corrected.

- Saline Community Hospital is an 82-bed acute care facility with a daily average census of 34 beds in 1986.

- The hospital does have a six-bed Coronary (Intensive) Care Unit, fully equipped and staffed by trained medical professionals.

- Saline Community Hospital has a total medical staff of 110 physicians, 82% of whom are board certified. Of the 52 physicians holding "active" status, 34, or 65%, are board certified specialists.

Saline Community Hospital views this data as valuable input into our existing quality assurance program. As the health care system is being increasingly held accountable for both a high standard of quality and the inherent economics, Saline Community Hospital's goal is to be responsive to this system while being responsible to the patient.

Sincerely,

William J. Lavery
Administrator

WJL:jaf

SAMARITAN HEALTH CENTER

5555 CONNER AVENUE
DETROIT, MI 48213

Medicare Hospital Provider Number: 230147

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	768	16	11 - 18	932	15	11 - 17
Cancer	16	56	16 - 63	15	33	21 - 67
Cerebrovascular Accidents	52	21	15 - 39	41	29	16 - 44
Gastrointestinal Catastrophes	6	17	12 - 74	11	55	9 - 65
Infectious Disease	25	48	27 - 67	23	39	21 - 62
Metabolic/Electrolyte Disorders	22	27	11 - 52	18	11	4 - 43
Pulmonary Disease	30	23	12 - 44	65	29	18 - 43
Renal Failure	21	29	7 - 61	10	40	13 - 77
Severe Acute Heart Disease	25	44	23 - 61	33	48	21 - 56
Severe Chronic Heart Disease	51	20	13 - 36	61	23	16 - 38
Severe Trauma	2	0	2 - 88	1	0	0 - 99
Gastrointestinal Disease	36	8	0 - 32	46	4	1 - 21
Gynecologic Disease	1	0	0 -100	0	-	-
Low-Risk Heart Disease	91	9	1 - 18	135	4	2 - 10
Musculoskeletal/Skin Conditions	43	2	0 - 32	58	3	0 - 30
Neuropsychiatric/Sensory Disease	13	0	0 - 84	16	6	0 - 99
Urologic Disease	35	3	0 - 31	51	4	0 - 32

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	320
Ownership/Control:	Church

STAFFING

Interns and Residents:	0
Registered Nurses:	273
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

SARATOGA GENERAL HOSPITAL

15000 GRATIOT AVENUE
DETROIT, MI 48205

Medicare Hospital Provider Number: 230063

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,516	15	10 - 15	1,532	15	10 - 15
Cancer	29	55	27 - 64	40	40	26 - 58
Cerebrovascular Accidents	87	26	17 - 37	84	25	17 - 37
Gastrointestinal Catastrophes	13	38	12 - 64	22	50	12 - 56
Infectious Disease	5	20	7 - 75	19	47	15 - 60
Metabolic/Electrolyte Disorders	25	40	12 - 52	35	40	10 - 46
Pulmonary Disease	84	37	16 - 39	60	23	11 - 35
Renal Failure	12	50	14 - 75	9	44	10 - 76
Severe Acute Heart Disease	41	34	25 - 55	74	39	29 - 53
Severe Chronic Heart Disease	98	27	15 - 34	114	30	15 - 34
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	104	2	1 - 9	110	4	1 - 11
Gynecologic Disease	9	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	245	3	1 - 7	245	7	2 - 9
Musculoskeletal/Skin Conditions	123	4	1 - 11	110	1	1 - 7
Neuropsychiatric/Sensory Disease	24	0	0 - 35	26	4	0 - 57
Urologic Disease	85	4	0 - 26	74	3	0 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	200
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	103
Percent of Physicians Who Are Board Certified Specialists:	56
Interns and Residents:	0
Registered Nurses:	118
Licensed Practical Nurses:	37

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SARATOGA
COMMUNITY HOSPITAL

15000 Gratiot Avenue
Detroit, Michigan 48205-1999
(313) 245-1200

Medicare Provider No. 230063

October 20, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

We wish to have the following comments published with Saratoga Community Hospital's 1987 HCFA mortality data:

"Our commitment at Saratoga Community Hospital has always been to provide quality health care to our patients and community. In keeping with this commitment, we have regularly reviewed mortality data along with several other parameters of quality care.

The industry standard for computing mortality rates is based on the total number of deaths per total number of discharges. According to this method of computation, Saratoga's Medicare mortality rate is actually 6% less than the rate identified in the HCFA release.

HCFA elected to determine the rate based on the number of patients who died within 30 days of their last admission. Since many of these deaths occur after the patient has been discharged, hospitals do not have access to this data and therefore have no basis for confirming, denying or explaining much of the data.

Although Saratoga falls within the normal ranges based on both methods of computation, it should be noted that we serve a unique population. Michigan Hospital Association data shows that 3% more of our patients have one or more comorbidities than other hospitals in the state, 2% more of our patients are in the 80 to 84 age group, and an additional 2% are in the 84+ age group. We also have 4% fewer patients in the under 70 age group.

The HCFA data is a single tool that can be used in an overall quality assurance program. It is not, in itself, an adequate evaluation of quality. As we continue to strive for excellence, we will continue to utilize all adequate data available to us to provide a meaningful evaluation of quality of care for Saratoga patients."

Sincerely,

K. Rand Dykman

K. Rand Dykman
Executive Director

KRD:ra
Encl. 1

SCHEURER HOSPITAL

170 NORTH CASEVILLE RD
PIGEON, MI 48755

Medicare Hospital Provider Number: 230201

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	240	8	7 - 15	262	10	8 - 16
Cancer	6	50	17 - 84	7	71	23 - 84
Cerebrovascular Accidents	4	50	7 - 83	6	50	8 - 76
Gastrointestinal Catastrophes	1	100	2 - 97	1	0	0 - 99
Infectious Disease	2	0	0 - 95	1	0	1 - 97
Metabolic/Electrolyte Disorders	4	0	2 - 73	2	50	0 - 98
Pulmonary Disease	21	10	13 - 43	24	4	13 - 37
Renal Failure	2	50	7 - 97	3	100	18 - 95
Severe Acute Heart Disease	7	43	15 - 79	6	17	22 - 82
Severe Chronic Heart Disease	6	33	1 - 77	10	30	5 - 61
Severe Trauma	1	100	3 - 98	0	-	-
Gastrointestinal Disease	31	0	0 - 22	24	4	0 - 74
Gynecologic Disease	6	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	59	0	1 - 9	53	0	1 - 10
Musculoskeletal/Skin Conditions	16	6	0 - 93	8	13	0 -100
Neuropsychiatric/Sensory Disease	2	0	0 -100	0	-	-
Urologic Disease	12	0	0 -100	29	0	0 - 70

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	47
Occupancy Rate (%):	70
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	4
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	20
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SCHOOLCRAFT MEM HOSP

500 MAIN ST
MANISTIQUE , MI 49854

Medicare Hospital Provider Number: 230115

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	258	11	9 - 17	308	12	8 - 16
Cancer	8	100	41 - 83	5	40	11 - 81
Cerebrovascular Accidents	9	33	7 - 65	6	17	6 - 69
Gastrointestinal Catastrophes	2	0	1 - 90	3	67	4 - 86
Infectious Disease	3	0	10 - 83	0	-	-
Metabolic/Electrolyte Disorders	2	0	0 - 99	8	13	3 - 61
Pulmonary Disease	17	29	8 - 52	31	19	10 - 41
Renal Failure	0	-	-	1	0	2 - 97
Severe Acute Heart Disease	14	29	13 - 60	16	31	15 - 60
Severe Chronic Heart Disease	21	19	9 - 45	19	16	8 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	34	0	0 - 18	31	3	1 - 25
Gynecologic Disease	1	0	0 -100	0	-	-
Low-Risk Heart Disease	48	2	0 - 20	43	0	1 - 13
Musculoskeletal/Skin Conditions	13	0	0 - 95	23	4	0 - 83
Neuropsychiatric/Sensory Disease	7	14	0 -100	12	0	0 - 98
Urologic Disease	2	0	0 -100	2	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	47
Occupancy Rate (%):	23
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	10
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	18
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SEAWAY HOSPITAL

5450 FORT STREET
TRENTON, MI 48183

Medicare Hospital Provider Number: 230176

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	774	16	10 - 16	739	15	9 - 15
Cancer	29	45	24 - 61	28	36	28 - 65
Cerebrovascular Accidents	33	39	13 - 46	33	21	13 - 42
Gastrointestinal Catastrophes	8	38	8 - 70	7	57	11 - 75
Infectious Disease	18	39	17 - 61	9	44	7 - 68
Metabolic/Electrolyte Disorders	14	14	8 - 51	6	0	5 - 59
Pulmonary Disease	36	28	14 - 45	38	29	11 - 42
Renal Failure	6	50	15 - 86	0	-	-
Severe Acute Heart Disease	34	41	22 - 56	33	58	25 - 59
Severe Chronic Heart Disease	46	35	11 - 40	37	24	13 - 42
Severe Trauma	0	-	-	1	0	1 - 97
Gastrointestinal Disease	48	8	0 - 45	59	7	0 - 32
Gynecologic Disease	11	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	141	4	1 - 10	147	6	1 - 11
Musculoskeletal/Skin Conditions	50	2	0 - 18	51	2	0 - 19
Neuropsychiatric/Sensory Disease	13	0	0 - 88	17	0	0 - 95
Urologic Disease	35	3	0 - 83	34	6	0 - 87

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	158
Occupancy Rate (%):	32
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	103
Percent of Physicians Who Are Board Certified Specialists:	50
Interns and Residents:	0
Registered Nurses:	88
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SHERIDAN COMMUNITY HOSPITAL

301 N MAIN STREET
SHERIDAN, MI 48884

Medicare Hospital Provider Number: 230178

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	149	15	9 - 22	180	5	7 - 14
Cancer	5	60	14 - 85	1	0	0 - 99
Cerebrovascular Accidents	7	43	8 - 72	5	0	4 - 63
Gastrointestinal Catastrophes	1	100	2 - 97	0	-	-
Infectious Disease	1	0	1 - 97	2	0	1 - 90
Metabolic/Electrolyte Disorders	3	0	3 - 79	1	0	1 - 97
Pulmonary Disease	25	24	9 - 45	20	10	7 - 39
Renal Failure	3	67	3 - 87	2	0	10 - 96
Severe Acute Heart Disease	4	50	6 - 82	5	40	5 - 77
Severe Chronic Heart Disease	9	11	5 - 55	7	0	3 - 52
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	11	0	0 - 87	19	5	0 - 94
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	21	5	0 - 41	26	4	0 - 45
Musculoskeletal/Skin Conditions	11	9	0 - 99	17	0	0 - 89
Neuropsychiatric/Sensory Disease	1	0	0 -100	1	0	0 -100
Urologic Disease	3	33	0 -100	7	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	42
Occupancy Rate (%):	26
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	10
Percent of Physicians Who Are Board Certified Specialists:	10
Interns and Residents:	0
Registered Nurses:	14
Licensed Practical Nurses:	20

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

517 291-3261

Sheridan Community Hospital

MEMBER AMERICAN OSTEOPATHIC HOSPITAL ASSOCIATION

301 North Main Street

Sheridan, Michigan 48884

Provider Number 230178

COMMENTS ON THE HCFA MORTALITY DATA

Data Verification

The data used by HCFA indicates that a total of 22 Medicare patients, admitted to Sheridan Community Hospital, died within 30 days of admission in 1987. Of these, eighteen died while still a patient of the hospital, while four died after discharge.

Our records indicate that 283 Medicare admissions occurred in 1987. We have no way of verifying HCFA's number of Medicare patients treated at our hospital or to verify the accuracy of the diagnostic or other data used in the analysis. However the date of death on [redacted] was incorrect and should have read [redacted].

SINAI HOSPITAL

6767 W OUTER DRIVE
DETROIT, MI 48235

Medicare Hospital Provider Number: 230024

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,634	11	12 - 15	3,815	12	12 - 16
Cancer	191	37	32 - 51	178	45	34 - 55
Cerebrovascular Accidents	147	18	18 - 33	136	20	22 - 37
Gastrointestinal Catastrophes	26	35	17 - 57	32	28	19 - 55
Infectious Disease	113	37	27 - 51	128	34	27 - 51
Metabolic/Electrolyte Disorders	55	13	15 - 40	68	18	17 - 42
Pulmonary Disease	176	31	19 - 36	186	32	19 - 37
Renal Failure	11	36	16 - 77	14	50	18 - 77
Severe Acute Heart Disease	154	26	30 - 47	154	41	32 - 50
Severe Chronic Heart Disease	171	19	17 - 31	175	21	17 - 32
Severe Trauma	4	50	4 - 82	7	29	12 - 74
Gastrointestinal Disease	177	2	1 - 7	216	2	1 - 7
Gynecologic Disease	32	0	0 -100	34	0	0 -100
Low-Risk Heart Disease	595	3	2 - 6	623	4	2 - 6
Musculoskeletal/Skin Conditions	195	3	1 - 7	241	1	1 - 6
Neuropsychiatric/Sensory Disease	110	1	1 - 8	169	1	1 - 6
Urologic Disease	130	0	0 - 6	149	1	1 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	560
Occupancy Rate (%):	78
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	598
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	152
Registered Nurses:	440
Licensed Practical Nurses:	85

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

SINAI
HOSPITAL
OF DETROIT

6767 WEST OUTER DRIVE
DETROIT, MICHIGAN 48235-2899

Hospital I.D. 230024

October 11, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Sinai Hospital of Detroit is in receipt of the 1987 Medicare Mortality Statistics. Review of these statistics shows the hospital to fall within the range for predicted mortality in all seventeen categories.

There has been one major discrepancy found in 'Severe Trauma Deaths.' Four patients fall into this category; two of the four are shown to have expired. In review of these cases, it was found one of the expired cases was not a patient at Sinai Hospital of Detroit. This changes the actual mortality rate for Severe Trauma Death from 50% to 33%.

In the 'All Other Disease' category, ten of the 3,634 cases are not Sinai Hospital of Detroit patients. One of those ten expired. This does not change the overall Mortality Rate.

The 'Pulmonary Disease and Low-Risk Disease' category, both show one case each as Sinai Hospital of Detroit patients who, in fact, were not our patients. These patients did not expire, and this discrepancy does not change the overall Mortality Rate.

Thank you for the opportunity to evaluate and respond to Sinai Hospital of Detroit HCFA Mortality Statistics.

Sincerely,

Dr. James F. Kelly
Executive Vice President,
Medical & Clinical Affairs

JK/DS:vlg

SOUTH HAVEN COMM HOSP

955 S BAILEY AVE
SOUTH HAVEN, MI 49090

Medicare Hospital Provider Number: 230085

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	492	16	11 - 18	481	13	11 - 18
Cancer	15	53	17 - 66	9	56	20 - 78
Cerebrovascular Accidents	14	36	8 - 57	14	36	12 - 60
Gastrointestinal Catastrophes	8	25	10 - 68	3	0	5 - 79
Infectious Disease	12	17	11 - 57	9	33	15 - 72
Metabolic/Electrolyte Disorders	12	25	6 - 58	12	25	6 - 58
Pulmonary Disease	47	26	13 - 40	69	19	15 - 37
Renal Failure	4	75	14 - 91	4	100	23 - 91
Severe Acute Heart Disease	21	33	26 - 66	28	25	26 - 58
Severe Chronic Heart Disease	34	29	14 - 45	31	13	10 - 36
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	37	8	0 - 40	33	0	0 - 21
Gynecologic Disease	8	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	47	0	1 - 11	69	3	1 - 13
Musculoskeletal/Skin Conditions	27	0	0 - 52	31	6	0 - 35
Neuropsychiatric/Sensory Disease	12	8	0 -100	8	13	0 -100
Urologic Disease	13	0	0 -100	17	0	0 - 77

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	52
Occupancy Rate (%):	50
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	31
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	54
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SOUTHWEST DETROIT HOSP

2401 20TH ST
DETROIT, MI 48226

Medicare Hospital Provider Number: 230266

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	515	13	10 - 17	681	12	9 - 15
Cancer	9	33	19 - 76	16	31	17 - 62
Cerebrovascular Accidents	29	24	11 - 43	29	17	12 - 42
Gastrointestinal Catastrophes	8	38	8 - 70	4	50	3 - 82
Infectious Disease	3	0	15 - 87	5	60	8 - 80
Metabolic/Electrolyte Disorders	26	31	13 - 52	33	15	10 - 41
Pulmonary Disease	35	34	13 - 45	54	30	14 - 41
Renal Failure	6	33	13 - 83	4	25	7 - 84
Severe Acute Heart Disease	20	50	20 - 62	24	46	20 - 59
Severe Chronic Heart Disease	37	24	11 - 40	51	8	14 - 32
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	25	0	0 - 30	40	2	0 - 30
Gynecologic Disease	2	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	82	1	1 - 9	107	1	1 - 7
Musculoskeletal/Skin Conditions	39	0	0 - 22	58	2	0 - 14
Neuropsychiatric/Sensory Disease	9	11	0 -100	16	0	0 - 84
Urologic Disease	36	3	0 - 94	30	3	0 - 30

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	216
Occupancy Rate (%):	56
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	163
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	4
Registered Nurses:	91
Licensed Practical Nurses:	24

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

SPRINGWELLS HEALTH CENTER

10151 MICHIGAN AVENUE
DEARBORN, MI 48126

Medicare Hospital Provider Number: 230057

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	23	0	1 - 22	53	15	4 - 26
Cancer	0	-	-	1	0	1 - 97
Cerebrovascular Accidents	0	-	-	2	100	2 - 89
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	2	0	1 - 90
Pulmonary Disease	1	0	0 -100	2	100	10 - 94
Renal Failure	1	0	2 - 97	0	-	-
Severe Acute Heart Disease	0	-	-	1	100	2 - 97
Severe Chronic Heart Disease	1	0	0 -100	5	20	2 - 75
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	1	0	0 -100	3	0	0 -100
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	1	0	0 -100	9	0	0 -100
Musculoskeletal/Skin Conditions	6	0	0 -100	9	0	0 -100
Neuropsychiatric/Sensory Disease	1	0	0 -100	0	-	-
Urologic Disease	1	0	0 -100	2	50	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	65
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	2
Registered Nurses:	15
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

ST FRANCIS HOSP

3401 LUDINGTON ST
ESCANABA, MI 49829

Medicare Hospital Provider Number: 230101

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	869	14	10 - 16	935	13	10 - 16
Cancer	27	74	33 - 68	22	68	31 - 71
Cerebrovascular Accidents	42	31	15 - 44	41	12	16 - 38
Gastrointestinal Catastrophes	8	50	14 - 76	11	27	9 - 62
Infectious Disease	8	38	12 - 72	20	30	13 - 55
Metabolic/Electrolyte Disorders	13	8	4 - 47	22	14	6 - 43
Pulmonary Disease	60	15	15 - 36	41	17	17 - 43
Renal Failure	0	-	-	5	40	17 - 92
Severe Acute Heart Disease	42	40	25 - 55	50	32	27 - 54
Severe Chronic Heart Disease	56	16	13 - 34	61	26	12 - 36
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	76	1	1 - 10	72	1	1 - 11
Gynecologic Disease	14	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	89	9	1 - 19	118	4	1 - 11
Musculoskeletal/Skin Conditions	76	3	1 - 12	97	0	1 - 6
Neuropsychiatric/Sensory Disease	16	0	0 - 94	25	4	0 - 73
Urologic Disease	37	3	0 - 49	41	10	0 - 89

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	96
Occupancy Rate (%):	55
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	36
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	83
Licensed Practical Nurses:	31

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST JOSEPH HOSP

302 KENSINGTON AVE
FLINT, MI 48502

Medicare Hospital Provider Number: 230068

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,082	14	11 - 15	2,936	14	11 - 15
Cancer	132	52	35 - 56	137	50	35 - 57
Cerebrovascular Accidents	115	37	18 - 37	112	25	18 - 36
Gastrointestinal Catastrophes	26	19	19 - 54	23	30	15 - 55
Infectious Disease	29	41	23 - 60	35	40	20 - 55
Metabolic/Electrolyte Disorders	50	36	18 - 49	54	22	15 - 43
Pulmonary Disease	150	31	19 - 37	128	23	14 - 33
Renal Failure	13	31	16 - 74	11	45	18 - 80
Severe Acute Heart Disease	126	44	29 - 49	100	40	27 - 49
Severe Chronic Heart Disease	180	26	17 - 31	175	24	17 - 32
Severe Trauma	1	0	1 - 97	4	25	4 - 80
Gastrointestinal Disease	216	3	1 - 7	204	4	1 - 8
Gynecologic Disease	18	0	0 -100	19	0	0 -100
Low-Risk Heart Disease	488	4	2 - 6	436	4	2 - 6
Musculoskeletal/Skin Conditions	231	2	1 - 6	231	2	1 - 6
Neuropsychiatric/Sensory Disease	69	3	1 - 14	62	6	1 - 20
Urologic Disease	142	2	0 - 11	133	1	1 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	423
Occupancy Rate (%):	65
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	236
Percent of Physicians Who Are Board Certified Specialists:	87
Interns and Residents:	45
Registered Nurses:	309
Licensed Practical Nurses:	127

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

ST JOSEPH HOSPITAL EAST WEST

215 NORTH AVENUE
MOUNT CLEMENS, MI 48043

Medicare Hospital Provider Number: 230047

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,007	12	10 - 14	2,926	12	10 - 14
Cancer	90	48	32 - 56	75	49	30 - 57
Cerebrovascular Accidents	120	27	20 - 37	136	24	20 - 36
Gastrointestinal Catastrophes	23	13	14 - 48	16	31	11 - 58
Infectious Disease	55	35	22 - 51	44	43	21 - 54
Metabolic/Electrolyte Disorders	72	18	12 - 38	60	18	13 - 39
Pulmonary Disease	164	28	18 - 35	146	23	17 - 34
Renal Failure	14	50	16 - 75	9	56	17 - 83
Severe Acute Heart Disease	125	39	31 - 50	126	47	30 - 50
Severe Chronic Heart Disease	150	27	17 - 33	164	25	17 - 32
Severe Trauma	4	25	2 - 81	5	20	7 - 76
Gastrointestinal Disease	206	3	2 - 8	186	1	2 - 6
Gynecologic Disease	20	0	0 - 99	19	0	0 -100
Low-Risk Heart Disease	442	2	2 - 5	446	2	2 - 5
Musculoskeletal/Skin Conditions	270	2	1 - 6	241	1	1 - 5
Neuropsychiatric/Sensory Disease	136	2	0 - 10	139	1	1 - 8
Urologic Disease	145	2	0 - 14	130	1	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	487
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	148
Percent of Physicians Who Are Board Certified Specialists:	80
Interns and Residents:	13
Registered Nurses:	275
Licensed Practical Nurses:	81

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

● HEALTH NETWORK

15855 Nineteen Mile Road
Mt. Clemens, Michigan 48044
(313) 263-2700

Hospital Centers
Health Resources, Inc.
Health Services, Inc.
ElderCare, Inc.
Foundation, Inc.

Medicare Provider No. 23-0047

October 24, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Health Standards and Quality Bureau
Hospital Mortality Information
P.O. Box 26684
Baltimore, Maryland 21207

Re: 1987 Medicare Mortality Rate Data

Dear Doctor Roper:

Mortality is one of many criteria utilized by St. Joseph's Hospital Centers to monitor quality of care. HCFA, in reporting mortality rates, has used epidemiological characteristics such as age, sex, prior hospitalizations, transfer status, and chronic conditions that affect the risk of death. Using these characteristics, St. Joseph's actual mortality rates fell within the "range of predicted mortality rates" in all reported diagnostic categories.

We remain concerned, however, that additional important indicators concerning the severity of illness preceding death are not used in the HCFA methodology. At St. Joseph's, we have found two additional indicators ("transfer from nursing home" and "no-code status/no resuscitation requested") as having predictive value for mortality rates. We feel that adding such risk factors which reflect severity of illness will provide a more realistic prediction of mortality rates.

In our review of HCFA data, we again found one mortality incorrectly assigned to St. Joseph's Hospital Centers; this death actually occurred at another acute PPS hospital.[1] In a diagnostic category where only a few mortalities are recorded, such a reporting error significantly affects the reported mortality rate. In this case, the "Actual Mortality Rate" for "Neuro-psychiatric and Sensory Disease" should be 1%, not 2%. This example of incorrect assignment was found in a review of only a limited sample.

We request that you provide an update regarding our hospital, as indicated below.[2]

Sincerely,

Mark L. Penkhus
President/Chief Executive Officer

/mg:2397G

[1]Mortality incorrectly assigned to St. Joseph's:

Patient ID No. (HIC)	Surname	Date of Admission
[redacted]	[redacted]	[redacted]

[2]Hospital Characteristics

Beds (#):	410
Occupancy Rate (%):	63
Ownership/Control: Private, non-profit	
Staffing:	
Total Number of Physicians:	250
Percent of Physicians who are Board Certified Specialists:	75
Interns and Residents per bed:	0
Registered Nurses per bed:	0.61
Licensed Practical Nurses per bed:	0.18

St. Joseph's

ST JOSEPH MERCY HOSP

900 WOODWARD AVE
PONTIAC, MI 48053

Medicare Hospital Provider Number: 230029

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,074	11	10 - 14	3,176	12	10 - 14
Cancer	95	38	33 - 57	126	39	31 - 53
Cerebrovascular Accidents	126	26	20 - 37	144	29	19 - 36
Gastrointestinal Catastrophes	20	25	16 - 57	23	26	14 - 54
Infectious Disease	43	33	20 - 51	38	47	23 - 57
Metabolic/Electrolyte Disorders	64	14	12 - 37	51	25	8 - 38
Pulmonary Disease	147	26	19 - 37	145	23	18 - 35
Renal Failure	13	62	14 - 73	11	18	19 - 77
Severe Acute Heart Disease	130	34	28 - 47	125	27	30 - 49
Severe Chronic Heart Disease	154	22	16 - 31	196	22	17 - 30
Severe Trauma	2	0	1 - 90	9	22	9 - 65
Gastrointestinal Disease	175	3	1 - 8	200	2	1 - 7
Gynecologic Disease	23	0	0 - 97	27	4	0 -100
Low-Risk Heart Disease	515	4	1 - 6	528	3	1 - 5
Musculoskeletal/Skin Conditions	307	2	1 - 5	268	2	1 - 6
Neuropsychiatric/Sensory Disease	114	4	0 - 14	117	3	0 - 11
Urologic Disease	138	1	0 - 9	102	2	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	466
Occupancy Rate (%):	84
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	330
Percent of Physicians Who Are Board Certified Specialists:	86
Interns and Residents:	84
Registered Nurses:	421
Licensed Practical Nurses:	53

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Comments on HCFA Mortality Data
St. Joseph Mercy Hospital
Pontiac, Michigan
Provider Number: 230029

October 20, 1988

Based on review of the HCFA Mortality Data, we make the following comments:

° Overall review of the data:

The hospital's overall mortality rate and rate for each diagnosis category fell into the predicted ranges. The predicted ranges and rates did not vary significantly from those reported for 1986 with the exception of the rate for renal disease which increased. We would note that this is a small number of cases where the average age of the patients was 86.8 years.

° Review of Methodology:

It is important to emphasize that the diagnostic categories relate to the principle diagnosis and not the cause of death. While in some categories (Cancer, Chronic Heart Disease, Cerebrovascular Accidents) it is likely that the principle diagnosis equates with the cause of death, in other categories (Neuro psychiatric and Sensory, Musculo Skeletal and Cutaneous) this relationship is unlikely. It should not be presumed that the cause of death was the principle diagnosis or resulted from treatment thereof. For some of the low risk categories it is likely that the principle diagnosis and cause of treatment are unrelated to cause of death.

Again, we express our concern over lack of adjustment for severity of illness also, it is difficult to find meaning in the predicted ranges since the ranges are wide.

° Services at St. Joseph Mercy:

Similar to our comments last year, we have included a list of programs at St. Joseph Mercy Hospital that we feel attract patients with higher than average risk of mortality.

- ° Supportive Care Services Program, treating chronically and and terminally ill patients in the hospital and at home. Included are a high proportion of cancer patients.
- ° Cardiac Surgery Program for bypass, open heart surgery, and angioplasty.
- ° Acute Hemodialysis Program.
- ° Affiliation with University based consultants for treatment of high risk gynecology cancer patients.

° Level I (for treatment of life threatening conditions) Full Service Emergency Center, accessible 24 hours per day.

Errors in the data:

° Review of the data revealed errors in date of death, principle diagnosis codes, citing post discharge deaths when the patient died in the hospital, including patients whose last discharge was not in 1987 or from this hospital. (See attached list for correction).

° The hospital characteristics were incorrectly transcribed from the AHA survey. Enclosed is the corrected information from the 1986 and 1987 survey.

ST JOSEPH MERCY HOSPITAL

5301 EAST HURON RIVER DRIVE
ANN ARBOR, MI 48106

Medicare Hospital Provider Number: 230156

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,727	11	10 - 14	4,602	11	10 - 14
Cancer	214	39	31 - 50	256	42	31 - 50
Cerebrovascular Accidents	192	21	20 - 34	153	18	19 - 34
Gastrointestinal Catastrophes	49	39	20 - 52	52	33	17 - 48
Infectious Disease	37	38	23 - 57	35	60	23 - 58
Metabolic/Electrolyte Disorders	73	23	15 - 41	63	22	14 - 41
Pulmonary Disease	150	31	20 - 38	148	21	18 - 35
Renal Failure	24	38	20 - 72	18	39	16 - 72
Severe Acute Heart Disease	200	30	28 - 44	176	34	29 - 46
Severe Chronic Heart Disease	193	21	17 - 30	213	21	16 - 29
Severe Trauma	20	40	11 - 56	6	17	3 - 70
Gastrointestinal Disease	245	2	1 - 7	264	3	2 - 7
Gynecologic Disease	57	0	0 -100	48	0	0 -100
Low-Risk Heart Disease	725	4	2 - 5	637	3	2 - 5
Musculoskeletal/Skin Conditions	474	3	1 - 5	411	1	1 - 4
Neuropsychiatric/Sensory Disease	166	1	1 - 7	165	3	1 - 9
Urologic Disease	228	2	0 - 8	197	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	511
Occupancy Rate (%):	84
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	394
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	80
Registered Nurses:	725
Licensed Practical Nurses:	37

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Catherine McAuley Health Center

Sponsored by the
Religious Sisters of Mercy
founded in 1831
by Catherine McAuley

5301 East Huron River Drive
P.O. Box 992
Ann Arbor, Michigan 48106
(313) 572-4025

October 19, 1988

Health Standards and Quality Bureau
Health Care Financing Administration
Attn: Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

REF: Medicare Hospital Mortality Information (1987) to Catherine McAuley Health Center (St. Joseph Mercy Hospital), Hospital ID #230156

The opportunity to comment on the 1987 mortality data regarding our hospital is again appreciated. The principle of providing the public with information regarding the quality of their health care system can not be faulted. Once again, our concerns are focused on the accuracy of the data and the validity of the methodology. It is recognized that continued efforts are being made each year to answer these dual concerns. However, the public and the media should be cautioned in their interpretation of the information soon to be distributed. There are still significant deficits in the calculations for variation of severity within diagnostic categories, the roles of specific hospitals within their regional networks of providers, and the reliability of the data collected.

A review of the data regarding our hospital indicated significant errors under "hospital characteristics" which are being corrected following a telephone consultation. Those errors included an indication that this hospital is an organ transplantation center (when, in fact, while providing dialysis services, organ transplants are not performed), and the number of licensed beds (554 rather than 414 as indicated). Our records indicate that the Last-Admission-Only Medicare discharges at this hospital numbered 5,312, which is 11% more than the 4,727 cases reported by HCFA. This discordancy may in part be explained by primary versus secondary Medicare coverage designation. The Federal data (HCFA) and state data (Michigan PRO) differed by 57 cases, yet presumably holding the cohort definitions identical. All numbers refer to the 16 study diagnosis categories only.

The hospital's source of information is restricted to the period of hospitalization. The HCFA report includes deaths occurring after discharge from the hospital, up to 30 days subsequent to admission. Our full verification of the data is hence not possible.

The scientific community has yet to reach a consensus as to the best measurement of severity variation within diagnostic categories. The current HCFA methodology attempts to ameliorate these inherent discordancies by

considering such factors as age, gender, and limited associated illnesses. Individual hospital record review confirms the importance of the severity issue: Our own 22 listed deaths within the diagnosis group "Infectious Diseases" for calendar year 1986 reveals: all were admitted as emergencies, 13 were 75 years of age or older (5 over 85), 7 died within 72 hours of admission, and 9 were suffering from advanced cancer ("infectious disease" representing the agonal event). Often significant associated illness ("comorbidities") are not reported due to the restrictive nature of the standard reporting formula. The measurement of severity of illness within specific diagnostic groups remains a critical factor in the acceptance of these annual reports by providers. Tertiary hospitals, such as our own, receive patients from a wide geographic distribution selected precisely <u>because</u> of the inordinate risk relating to that patient's illness.

To conclude, the effort to provide patients and society, in general, with accurate measurements of health care services quality is laudable. Those professionals in health care, be they physicians, hospital staff, administrators, or regulators, are generally conversant with the difficulties inherent in such ranking of performance. We would only ask that the public at large be made equally aware of the shortfalls and discordancies between the data presented and the connotations regarding quality of care. The service intended is proper, the <u>potential</u> for disservice persists.

Yours truly,

Robert E. Laverty
President
Catherine McAuley Health Center

Charles M. Watts, M.D.
Chairman, Medical Care Review Committee
Catherine McAuley Health Center

R88-300

ST LAWRENCE HOSPITAL

1210 W SAGINAW ST
LANSING, MI 48914

Medicare Hospital Provider Number: 230157

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,163	14	10 - 15	1,076	11	10 - 15
Cancer	32	38	30 - 65	24	42	18 - 58
Cerebrovascular Accidents	42	17	14 - 38	35	14	15 - 40
Gastrointestinal Catastrophes	11	55	12 - 68	12	25	17 - 67
Infectious Disease	23	43	17 - 59	26	38	18 - 57
Metabolic/Electrolyte Disorders	39	26	9 - 42	30	30	10 - 47
Pulmonary Disease	64	39	18 - 43	57	19	14 - 38
Renal Failure	5	40	7 - 82	1	100	1 - 97
Severe Acute Heart Disease	56	29	25 - 50	54	26	26 - 51
Severe Chronic Heart Disease	49	35	14 - 41	56	27	15 - 40
Severe Trauma	0	-	-	4	50	6 - 83
Gastrointestinal Disease	55	4	0 - 20	80	6	0 - 21
Gynecologic Disease	15	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	100	3	1 - 11	133	4	1 - 10
Musculoskeletal/Skin Conditions	76	3	0 - 14	101	2	1 - 10
Neuropsychiatric/Sensory Disease	71	1	0 - 23	32	0	0 - 51
Urologic Disease	60	2	0 - 21	49	0	0 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	441
Occupancy Rate (%):	80
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	178
Percent of Physicians Who Are Board Certified Specialists:	80
Interns and Residents:	14
Registered Nurses:	261
Licensed Practical Nurses:	21

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Hospital & Healthcare Services St. Lawrence

October 20, 1988

COMMENTS ON THE HCFA MORTALITY DATA
St. Lawrence Hospital and Healthcare Services
Lansing, Michigan

Medicare Provider Number: 230157

Dear Sirs:

Thank you for providing hospital-specific mortality information again this year. In regard to the HCFA mortality report, please note the following:

1. Some data discrepancies are noted in the HCFA data. Case specific corrections are listed on the attached case listing. One case is listed by HCFA with an incorrect discharge date. Two cases are listed with incorrect dates of death; correct dates of death have been verified with our records.

2. HCFA has indicated that the hospital characteristics it provided were obtained from the 1986 AHA Annual Survey. The data provided is confusing and in some cases cannot be reconciled with data submitted by the hospital to AHA. It would be helpful if HCFA would provide specific definitions for each data element in the hosptial characteristics in order to clarify this information.

   There is confusion with the number of beds listed, the occupancy rate, the percentage of board certified specialists, and the numbers of registered nurses and licensed practical nurses per bed.

3. As part of our hospital-wide quality assurance program, it is our practice to review mortality cases through a peer review process. Such an ongoing review process is important in maintaining our high level of quality care.

Sincerely,

Arthur Knueppel
President and Chief Executive Officer

ST LUKES HOSP

705 COOPER
SAGINAW, MI 48602

Medicare Hospital Provider Number: 230070

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,301	11	10 - 14	2,131	11	9 - 14
Cancer	100	35	28 - 51	86	40	29 - 54
Cerebrovascular Accidents	83	28	18 - 38	88	31	17 - 38
Gastrointestinal Catastrophes	22	36	19 - 61	18	39	18 - 64
Infectious Disease	15	7	15 - 50	19	26	16 - 58
Metabolic/Electrolyte Disorders	35	14	8 - 39	25	24	7 - 45
Pulmonary Disease	84	25	15 - 37	95	33	14 - 36
Renal Failure	7	57	11 - 80	11	36	16 - 78
Severe Acute Heart Disease	96	39	28 - 49	75	31	28 - 51
Severe Chronic Heart Disease	103	29	17 - 36	101	24	14 - 32
Severe Trauma	4	0	4 - 71	2	50	3 - 92
Gastrointestinal Disease	190	2	2 - 7	185	2	1 - 7
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	292	2	2 - 6	289	4	2 - 7
Musculoskeletal/Skin Conditions	270	2	1 - 6	210	0	1 - 5
Neuropsychiatric/Sensory Disease	39	0	1 - 14	45	4	0 - 42
Urologic Disease	102	3	0 - 24	100	2	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	282
Occupancy Rate (%):	54
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	131
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	0
Registered Nurses:	192
Licensed Practical Nurses:	93

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

stLukes

Provider #23-0070
October 20, 1988

William Roper, MD
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper,

I appreciate the opportunity to comment on the Mortality Statistics for Medicare patients prior to their publication. The quality of patient care is of principal importance to St. Luke's Hospital and its medical staff. We have an active quality assurance program in which the continual improvement of the quality of patient care is the primary goal.

We have some general comments to make regarding the Mortality Statistics. The patient specific data errors we identified are listed in the attached report.

We have found several errors in the Hospital Characteristics section of the report. First, St. Luke's Hospital has 282 license beds not 175 beds. In 1987, we had 131 physicians with Active or Associate membership on our Medical Staff, 109 of which were board certified. We had 1.22 Registered Nurses per occupied bed and .59 Licensed Pratical Nurse per occupied bed.

When the deaths that occurred after leaving St. Luke's hospital are not included in the calculation of our death rate, our death rate is reduced to 8%, even when including only those Medicare patients whose last admission was at St. Luke's Hospital. When the death rate calculation is based on our total Medicare admissions for 1987 and does not include those patients who died after discharge from the hospital, then our death rate is only 5%.

Of the patients who died after discharge, but within 30 days of admission to St. Luke's Hospital, 39% were transferred to another facility, either a skilled or basic care facility. One of these patients was transferred to the Veterans Administration Hospital. Evaluation of the last admission of the patients who died following discharge, revealed that the patients were all in a stable condition and their discharge from an acute care facility was appropriate.

Compared to statewide statistics of Medicare patients, a greater percentage of St. Luke's Hospital Medicare patients are over 75 years old. Approximately 69% of St. Luke's Hospital Medicare patients who died were over 75 years old.
St. Luke's Hospital case mix index for Medicare inpatients in 1987 has increased over the past two years. Our overall case mix index for Medicare patients for Fiscal Year 1987 was 1.23. Our Medicare case mix index for July through December of 1987 was 1.284.

The three deaths listed under the urological disease category, were all over 80 years old and they all had significant comorbid conditions.

The severe chronic heart disease deaths were all severely ill patients. 74% of these severe chronic heart disease patients were over 75 years of age. 42% were admitted to the critical care units of the hospital. 35% had cardiac or respiratory arrest with successful resuscitation. In 61% of these cases, the patient or the patient's family request that no CPR or resuscitative measures be taken.

Sincerely,

Helen Thompson, RRA
Director, Medical Data Services

ST MARY HOSPITAL

36475 FIVE MILE ROAD
LIVONIA, MI 48154

Medicare Hospital Provider Number: 230002

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,606	13	11 - 16	2,428	12	11 - 16
Cancer	94	47	33 - 57	71	35	30 - 55
Cerebrovascular Accidents	117	32	19 - 38	104	26	21 - 39
Gastrointestinal Catastrophes	22	36	14 - 56	25	40	15 - 56
Infectious Disease	35	37	22 - 57	32	31	23 - 58
Metabolic/Electrolyte Disorders	66	29	16 - 44	75	15	15 - 38
Pulmonary Disease	146	29	19 - 37	124	26	18 - 37
Renal Failure	18	11	13 - 63	23	43	19 - 73
Severe Acute Heart Disease	123	33	29 - 48	114	34	30 - 50
Severe Chronic Heart Disease	176	27	16 - 31	151	27	17 - 33
Severe Trauma	4	0	8 - 73	2	50	1 - 94
Gastrointestinal Disease	188	4	1 - 9	193	2	1 - 7
Gynecologic Disease	17	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	418	3	2 - 6	359	2	2 - 6
Musculoskeletal/Skin Conditions	175	2	1 - 7	172	0	2 - 5
Neuropsychiatric/Sensory Disease	78	0	1 - 8	42	5	0 - 62
Urologic Disease	156	1	1 - 6	148	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	304
Occupancy Rate (%):	82
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	249
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	0
Registered Nurses:	272
Licensed Practical Nurses:	31

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

ST MARYS HOSP

200 JEFFERSON ST SE
GRAND RAPIDS, MI 49503

Medicare Hospital Provider Number: 230059

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,657	13	10 - 14	3,031	14	11 - 15
Cancer	102	35	28 - 51	175	39	31 - 51
Cerebrovascular Accidents	127	24	18 - 35	155	22	20 - 35
Gastrointestinal Catastrophes	45	27	20 - 51	43	37	20 - 53
Infectious Disease	39	44	22 - 56	42	36	21 - 54
Metabolic/Electrolyte Disorders	32	25	9 - 44	34	26	11 - 45
Pulmonary Disease	131	25	18 - 36	149	26	16 - 34
Renal Failure	53	32	7 - 55	74	18	6 - 54
Severe Acute Heart Disease	115	45	26 - 47	122	39	29 - 49
Severe Chronic Heart Disease	129	26	15 - 32	151	25	15 - 30
Severe Trauma	9	44	8 - 69	2	50	0 - 96
Gastrointestinal Disease	149	6	1 - 11	205	7	1 - 10
Gynecologic Disease	29	3	0 -100	34	3	0 -100
Low-Risk Heart Disease	193	2	2 - 6	250	2	2 - 7
Musculoskeletal/Skin Conditions	305	3	0 - 6	313	1	1 - 4
Neuropsychiatric/Sensory Disease	91	3	0 - 16	94	2	0 - 13
Urologic Disease	179	3	0 - 11	148	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	370
Occupancy Rate (%):	49
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	225
Percent of Physicians Who Are Board Certified Specialists:	82
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

SAINT MARY'S
HEALTH SERVICES

200 Jefferson S.E.
Grand Rapids
Michigan 49503
616 774-6292

October 14, 1988

Medicare Provider #230059

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

This letter is in response to the 1987 Mortality Data scheduled for public release in December 1988. We have reviewed this data and the statistical methodology used. The number of reported deaths for Saint Mary's Health Services appears accurate. For obvious reasons, we cannot verify the number of deaths which occurred following discharge from our hospital.

We agree with the statement in your September 15, 1988 letter that mortality information "is not a complete measure of the quality of care at an individual hospital." Mortality review is considered one important component of our comprehensive quality assurance plan, and is conducted regularly. The fact that the mortality rates for Saint Mary's Health Services all fell within their predicted ranges was not surprising. And, interestingly, your application of the revised computing methodology to our 1986 data caused the one percentage which fell outside of the range last year, to fall within its predicted range using the new methodology.

In summary, we are pleased to see that HCFA is attempting to improve the methodology used in determining mortality rates. One suggestion we would like to make is that HCFA make future data releases available on computer diskettes so that hospitals can more efficiently and effectively analyze their data.

Sincerely,

William A. Himmelsbach, Jr.
President and C.E.O.

pc

cc: Sally Rynberg
Ed Carlson

ST MARYS MEDICAL CENTER

830 S JEFFERSON
SAGINAW, MI 48601

Medicare Hospital Provider Number: 230077

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,460	12	8 - 12	2,249	11	9 - 13
Cancer	62	45	27 - 54	93	34	31 - 54
Cerebrovascular Accidents	83	36	18 - 40	59	32	14 - 39
Gastrointestinal Catastrophes	17	41	14 - 61	15	40	14 - 63
Infectious Disease	6	17	9 - 71	7	14	13 - 70
Metabolic/Electrolyte Disorders	41	27	14 - 46	22	27	10 - 51
Pulmonary Disease	76	24	14 - 36	65	18	13 - 35
Renal Failure	6	33	16 - 86	4	75	10 - 86
Severe Acute Heart Disease	90	40	25 - 47	74	42	28 - 52
Severe Chronic Heart Disease	96	31	13 - 33	107	29	15 - 34
Severe Trauma	11	27	9 - 62	5	20	4 - 75
Gastrointestinal Disease	103	6	1 - 14	102	5	1 - 13
Gynecologic Disease	4	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	711	3	2 - 5	698	3	2 - 6
Musculoskeletal/Skin Conditions	278	1	1 - 5	170	1	1 - 6
Neuropsychiatric/Sensory Disease	74	3	1 - 14	75	1	0 - 14
Urologic Disease	63	3	0 - 30	49	2	0 - 49

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	238
Occupancy Rate (%):	83
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	83
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	289
Licensed Practical Nurses:	37

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

ST MARY'S
MEDICAL CENTER

830 SOUTH JEFFERSON AVENUE
SAGINAW, MICHIGAN 48601
(517) 776-8000

October 25, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D2 Meadows East Building
6325 Security Blvd.
Baltimore, Maryland 21207

Re: HCFA Mortality Data Listing 1987
Medicare Provider No. 230077

To Whom it May Concern:

ST. MARY'S MEDICAL CENTER VERIFICATION OF DATA

St. Mary's Medical Center has verified that there were 251 patients who expired at St. Mary's according to the population identified by HCFA. Seventy-seven (77%) percent of the patients had a co-morbidity condition that affected their treatment, including congestive heart failure, diabetes, cancer and renal failure. Sixty (60%) percent of the population was defined as being high risk by HCFA with sixty-two (62%) percent of the patients over the age of 72.

Classification of severe burns and coronary artery disease with open heart procedures should be changed to high risk category.

In addition, the correct bed count for St. Mary's Medical Center is 238.

Sincerely,

Edward Cook

Edward Cook
President and
Chief Executive Officer

EC/11

enclosure

ST. JOHN HOSPITAL-MACOMB CENTER

26755 BALLARD ROAD
MOUNT CLEMENS, MI 48045

Medicare Hospital Provider Number: 230257

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	178	15	9 - 20	184	9	5 - 15
Cancer	4	25	15 - 88	3	33	5 - 86
Cerebrovascular Accidents	3	0	11 - 83	4	25	2 - 81
Gastrointestinal Catastrophes	4	25	7 - 81	1	0	0 - 98
Infectious Disease	3	100	6 - 80	1	0	0 - 99
Metabolic/Electrolyte Disorders	6	33	4 - 73	4	0	2 - 72
Pulmonary Disease	14	21	13 - 57	10	50	6 - 64
Renal Failure	1	100	3 - 98	0	-	-
Severe Acute Heart Disease	7	29	12 - 73	7	86	15 - 70
Severe Chronic Heart Disease	11	36	6 - 61	5	20	4 - 73
Severe Trauma	2	0	5 - 89	0	-	-
Gastrointestinal Disease	13	0	1 - 37	9	0	0 - 88
Gynecologic Disease	3	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	21	10	0 - 92	21	0	0 - 59
Musculoskeletal/Skin Conditions	25	0	0 - 63	36	0	0 - 62
Neuropsychiatric/Sensory Disease	1	0	0 -100	10	0	0 - 91
Urologic Disease	3	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	96
Occupancy Rate (%):	39
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	63
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	7
Registered Nurses:	26
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

STANDISH COMMUNITY HOSPITAL

BOX 579 805 W CEDAR STREET
STANDISH, MI 48658

Medicare Hospital Provider Number: 230205

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	320	11	9 - 17	353	11	10 - 17
Cancer	5	40	12 - 82	6	50	14 - 81
Cerebrovascular Accidents	16	38	11 - 57	11	27	13 - 64
Gastrointestinal Catastrophes	2	0	7 - 91	2	0	4 - 88
Infectious Disease	6	50	7 - 75	3	0	8 - 81
Metabolic/Electrolyte Disorders	3	0	4 - 79	8	13	2 - 63
Pulmonary Disease	30	23	16 - 48	44	11	15 - 38
Renal Failure	1	100	0 - 98	0	-	-
Severe Acute Heart Disease	9	44	11 - 69	21	43	18 - 59
Severe Chronic Heart Disease	24	25	7 - 43	22	32	9 - 49
Severe Trauma	1	0	1 - 97	0	-	-
Gastrointestinal Disease	16	0	0 - 96	21	0	0 - 51
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	90	2	1 - 10	73	0	1 - 7
Musculoskeletal/Skin Conditions	14	0	1 - 33	9	0	0 -100
Neuropsychiatric/Sensory Disease	2	0	0 -100	3	0	0 -100
Urologic Disease	5	0	0 -100	6	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	81
Occupancy Rate (%):	63
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	23
Percent of Physicians Who Are Board Certified Specialists:	4
Interns and Residents:	0
Registered Nurses:	0
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

STRAITH MEMORIAL HOSPITAL

23901 LAHSER
SOUTHFIELD, MI 48075

Medicare Hospital Provider Number: 230071

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	138	0	0 - 6	168	0	0 - 6
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	0	-	-
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	1	0	0 -100
Musculoskeletal/Skin Conditions	22	0	0 -100	37	0	0 - 97
Neuropsychiatric/Sensory Disease	110	0	0 - 8	111	0	0 - 7
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	34
Occupancy Rate (%):	15
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	11
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

STURGIS HOSPITAL

916 MYRTLE AVE
STURGIS, MI 49091

Medicare Hospital Provider Number: 230096

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	474	14	8 - 15	453	15	8 - 16
Cancer	13	38	15 - 65	7	57	9 - 73
Cerebrovascular Accidents	13	38	7 - 58	17	41	9 - 55
Gastrointestinal Catastrophes	5	60	6 - 78	2	50	1 - 93
Infectious Disease	7	14	9 - 66	6	33	6 - 74
Metabolic/Electrolyte Disorders	5	20	1 - 80	2	50	1 - 93
Pulmonary Disease	32	16	10 - 38	42	19	14 - 40
Renal Failure	2	50	1 - 94	1	100	2 - 98
Severe Acute Heart Disease	21	71	23 - 61	18	72	25 - 66
Severe Chronic Heart Disease	22	27	6 - 45	25	44	7 - 47
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	45	4	0 - 25	52	6	0 - 25
Gynecologic Disease	6	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	50	8	0 - 29	51	2	0 - 16
Musculoskeletal/Skin Conditions	29	3	0 - 46	34	3	0 - 50
Neuropsychiatric/Sensory Disease	8	0	0 - 99	13	0	0 - 89
Urologic Disease	43	5	0 - 50	29	3	0 - 85

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	57
Occupancy Rate (%):	42
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	21
Percent of Physicians Who Are Board Certified Specialists:	90
Interns and Residents:	0
Registered Nurses:	40
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

TAWAS ST JOSEPH HOSPITAL

200 HEMLOCK
TAWAS CITY, MI 48763

Medicare Hospital Provider Number: 230100

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	814	13	9 - 14	800	13	7 - 13
Cancer	8	25	17 - 74	9	56	19 - 77
Cerebrovascular Accidents	9	33	7 - 65	15	20	11 - 53
Gastrointestinal Catastrophes	8	25	10 - 69	5	20	3 - 75
Infectious Disease	5	20	7 - 75	5	40	5 - 78
Metabolic/Electrolyte Disorders	13	38	11 - 63	13	46	5 - 60
Pulmonary Disease	65	28	18 - 42	57	26	12 - 38
Renal Failure	1	0	1 - 97	3	67	10 - 92
Severe Acute Heart Disease	49	49	24 - 53	26	38	19 - 57
Severe Chronic Heart Disease	43	26	9 - 37	58	31	10 - 35
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	71	1	0 - 12	65	5	0 - 19
Gynecologic Disease	6	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	109	2	1 - 9	109	2	1 - 8
Musculoskeletal/Skin Conditions	66	2	0 - 19	47	11	0 - 88
Neuropsychiatric/Sensory Disease	15	0	0 - 43	20	5	0 -100
Urologic Disease	36	3	0 - 81	52	4	0 - 64

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	65
Occupancy Rate (%):	63
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	26
Percent of Physicians Who Are Board Certified Specialists:	62
Interns and Residents:	0
Registered Nurses:	42
Licensed Practical Nurses:	27

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

THORN HOSPITAL

458 CROSS ST
HUDSON, MI 49247

Medicare Hospital Provider Number: 230158

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	85	8	9 - 21	100	18	5 - 22
Cancer	2	50	3 - 92	0	-	-
Cerebrovascular Accidents	4	0	9 - 72	3	33	1 - 90
Gastrointestinal Catastrophes	1	0	3 - 99	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	3	0	1 - 82
Pulmonary Disease	15	20	13 - 55	17	41	11 - 56
Renal Failure	1	0	3 - 99	1	100	3 - 98
Severe Acute Heart Disease	2	50	1 - 92	2	0	1 - 89
Severe Chronic Heart Disease	3	33	1 - 89	3	33	0 - 91
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	7	0	0 -100	7	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	13	0	0 - 63	17	0	0 - 49
Musculoskeletal/Skin Conditions	2	0	0 -100	9	11	0 -100
Neuropsychiatric/Sensory Disease	2	0	0 -100	2	0	0 -100
Urologic Disease	1	0	0 -100	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	22
Occupancy Rate (%):	23
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	12
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	9
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

THREE RIVERS HOSPITAL

1111 WEST BROADWAY
THREE RIVERS, MI 49093

Medicare Hospital Provider Number: 230015

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	476	12	10 - 17	501	14	10 - 18
Cancer	10	40	15 - 70	12	67	18 - 69
Cerebrovascular Accidents	19	42	14 - 57	18	50	11 - 56
Gastrointestinal Catastrophes	2	0	3 - 88	4	25	10 - 84
Infectious Disease	11	36	14 - 68	9	33	13 - 70
Metabolic/Electrolyte Disorders	9	33	3 - 66	10	0	3 - 45
Pulmonary Disease	49	22	15 - 40	43	26	16 - 44
Renal Failure	3	67	8 - 90	2	0	7 - 91
Severe Acute Heart Disease	17	18	23 - 61	29	52	24 - 60
Severe Chronic Heart Disease	30	20	10 - 40	34	18	11 - 38
Severe Trauma	0	-	-	1	0	0 - 97
Gastrointestinal Disease	56	0	1 - 10	68	1	1 - 11
Gynecologic Disease	5	0	0 - 99	9	0	0 -100
Low-Risk Heart Disease	41	2	1 - 20	72	3	1 - 13
Musculoskeletal/Skin Conditions	33	3	0 - 32	30	3	0 - 29
Neuropsychiatric/Sensory Disease	3	0	0 -100	4	0	0 -100
Urologic Disease	30	0	0 - 22	14	0	0 - 89

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	60
Occupancy Rate (%):	42
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	17
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	0
Registered Nurses:	31
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

TOLFREE MEMORIAL HOSPITAL

335 E HOUGHTON AVENUE
WEST BRANCH, MI 48661

Medicare Hospital Provider Number: 230095

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	954	13	10 - 15	950	14	11 - 16
Cancer	27	56	23 - 61	21	71	28 - 68
Cerebrovascular Accidents	31	23	14 - 45	32	19	20 - 48
Gastrointestinal Catastrophes	5	20	16 - 83	8	25	17 - 75
Infectious Disease	2	0	7 - 91	8	38	7 - 69
Metabolic/Electrolyte Disorders	17	6	8 - 42	10	50	8 - 66
Pulmonary Disease	70	27	15 - 38	52	31	13 - 40
Renal Failure	2	100	9 - 93	2	100	8 - 93
Severe Acute Heart Disease	58	43	28 - 54	100	30	31 - 51
Severe Chronic Heart Disease	63	22	14 - 35	55	25	13 - 37
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	87	2	0 - 13	84	6	0 - 17
Gynecologic Disease	9	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	176	3	2 - 8	192	2	1 - 7
Musculoskeletal/Skin Conditions	60	3	0 - 28	42	0	0 - 27
Neuropsychiatric/Sensory Disease	16	0	0 - 62	20	5	0 - 99
Urologic Disease	20	5	0 -100	28	0	0 - 81

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	92
Ownership/Control:	Local Government

STAFFING

Interns and Residents:	0
Registered Nurses:	52
Licensed Practical Nurses:	53

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

TRAVERSE CITY OSTEOPATHIC HOSP

550 MUNSON AVENUE
TRAVERSE CITY, MI 49684

Medicare Hospital Provider Number: 230228

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	680	11	10 - 16	635	13	11 - 17
Cancer	12	58	17 - 69	19	32	24 - 66
Cerebrovascular Accidents	31	16	16 - 44	18	33	15 - 58
Gastrointestinal Catastrophes	6	50	4 - 75	5	40	10 - 81
Infectious Disease	7	29	10 - 72	6	67	14 - 80
Metabolic/Electrolyte Disorders	17	6	11 - 44	16	31	9 - 56
Pulmonary Disease	49	18	14 - 38	40	22	15 - 43
Renal Failure	3	33	5 - 88	5	20	14 - 85
Severe Acute Heart Disease	40	40	24 - 55	31	42	26 - 60
Severe Chronic Heart Disease	41	22	10 - 37	35	20	14 - 42
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	44	0	1 - 13	40	0	1 - 13
Gynecologic Disease	10	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	67	3	1 - 13	52	4	0 - 21
Musculoskeletal/Skin Conditions	105	2	0 - 10	100	2	1 - 10
Neuropsychiatric/Sensory Disease	23	4	0 - 85	17	6	0 - 98
Urologic Disease	26	4	0 - 99	26	0	0 - 81

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	81
Occupancy Rate (%):	59
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	48
Percent of Physicians Who Are Board Certified Specialists:	42
Interns and Residents:	6
Registered Nurses:	60
Licensed Practical Nurses:	24

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

TRI COUNTY COMM HOSP

1131 E HOWARD CITY
EDMORE, MI 48829

Medicare Hospital Provider Number: 230179

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	44	5	3 - 19	53	9	6 - 24
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	2	50	4 - 92	4	25	8 - 82
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	1	100	0 - 98
Metabolic/Electrolyte Disorders	1	0	0 -100	3	33	3 - 86
Pulmonary Disease	3	0	2 - 80	3	0	1 - 84
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	1	0	0 - 99	2	50	3 - 92
Severe Chronic Heart Disease	1	0	0 -100	4	0	2 - 72
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	3	0	0 -100	3	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	9	11	0 -100	4	0	0 -100
Musculoskeletal/Skin Conditions	1	0	0 -100	2	0	0 -100
Neuropsychiatric/Sensory Disease	6	0	0 -100	9	0	0 -100
Urologic Disease	1	0	0 -100	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	58
Occupancy Rate (%):	53
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	5
Percent of Physicians Who Are Board Certified Specialists:	40
Interns and Residents:	0
Registered Nurses:	7
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

UNITED MEMORIAL HOSPITAL

615 S BOWER STREET
GREENVILLE, MI 48838

Medicare Hospital Provider Number: 230035

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	293	16	9 - 18	269	12	8 - 16
Cancer	5	60	11 - 82	5	60	12 - 83
Cerebrovascular Accidents	13	62	13 - 63	14	36	9 - 58
Gastrointestinal Catastrophes	4	25	5 - 80	3	67	0 - 91
Infectious Disease	7	43	9 - 73	3	0	4 - 79
Metabolic/Electrolyte Disorders	8	25	5 - 66	6	33	1 - 78
Pulmonary Disease	25	28	17 - 53	27	19	12 - 44
Renal Failure	2	100	7 - 91	1	100	0 - 98
Severe Acute Heart Disease	4	25	10 - 83	5	60	8 - 79
Severe Chronic Heart Disease	21	19	9 - 45	12	25	6 - 56
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	35	9	0 - 45	31	0	0 - 19
Gynecologic Disease	3	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	34	3	0 - 37	26	4	0 - 37
Musculoskeletal/Skin Conditions	24	4	0 - 92	18	0	0 - 71
Neuropsychiatric/Sensory Disease	5	0	0 - 93	7	0	0 -100
Urologic Disease	5	0	0 -100	7	14	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	91
Occupancy Rate (%):	57
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	14
Percent of Physicians Who Are Board Certified Specialists:	50
Interns and Residents:	0
Registered Nurses:	31
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

UNIVERSITY HOSPITAL

1500 E MEDICAL CENTER DRIVE
ANN ARBOR, MI 48104

Medicare Hospital Provider Number: 230046

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,482	8	9 - 12	3,547	9	9 - 13
Cancer	208	31	31 - 50	249	26	35 - 53
Cerebrovascular Accidents	55	24	15 - 39	56	21	18 - 41
Gastrointestinal Catastrophes	40	22	23 - 54	48	29	20 - 51
Infectious Disease	26	42	20 - 59	25	56	21 - 61
Metabolic/Electrolyte Disorders	23	13	9 - 43	26	4	5 - 33
Pulmonary Disease	94	20	16 - 35	87	30	17 - 39
Renal Failure	71	7	1 - 54	63	16	2 - 56
Severe Acute Heart Disease	113	32	26 - 46	111	25	27 - 46
Severe Chronic Heart Disease	90	21	16 - 34	112	25	17 - 35
Severe Trauma	8	38	7 - 70	11	36	7 - 64
Gastrointestinal Disease	113	4	2 - 11	124	1	1 - 7
Gynecologic Disease	68	0	0 - 80	43	0	0 - 87
Low-Risk Heart Disease	363	5	2 - 7	332	7	2 - 8
Musculoskeletal/Skin Conditions	370	2	1 - 5	381	2	1 - 5
Neuropsychiatric/Sensory Disease	364	1	1 - 5	415	1	1 - 5
Urologic Disease	137	1	0 - 8	124	0	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	799
Occupancy Rate (%):	88
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	559
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	523
Registered Nurses:	1,425
Licensed Practical Nurses:	136

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

UNIVERSITY OF MICHIGAN MEDICAL CENTER

The University of Michigan Hospitals
Ann Arbor, Michigan 48109-0472

John D. Forsyth
Executive Director
(313) 764-1505

October 19, 1988

William L. Roper, MD
Administrator
Health Standards & Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

The Health Care Financing Administration (HCFA) is to be commended for its efforts to further refine its mortality reporting methodology to enable its use as an indicator of quality among Medicare hospital providers.

An analysis of the data for Medicare patients at the University of Michigan Hospitals (UM Hospitals) reveals that the mortality rates for all diagnostic groups fall within the expected ranges. Even so, when looking at detailed information on all Medicare patients who died, it is clear that many factors contributing to mortality are not considered by the HCFA methodology:

- For a number of our Medicare patients, a secondary diagnosis, not the principal diagnosis, is more reflective of the cause of death or condition leading to death. For example, some of our deceased patients grouped under the category "low risk heart disease" had a secondary diagnosis that would have placed them in the category "severe chronic heart disease." We recommend that, rather than grouping solely by principal diagnosis, HCFA utilize a hierarchical process that considers all dignoses for a patient and assigns the patient to a diagnostic category based on the condition with the highest level of severity.

- Many Medicare patients had multiple comorbid conditions as secondary diagnoses, which is an indicator of the relative severity of their illness. Further, in reviewing the medical records of these patients, it was determined that within an individual diagnosis there are varying levels of severity which cannot be described through the existing diagnosis classification systems. Clearly these patients had a higher severity of illness and their probability of dying was greater than others falling into the same diagnosis group. We recommend that HCFA continue to pursue the identification of a reasonable system for describing severity of illness and that such a system, when available, be utilized in further refining HCFA's mortality reporting methodology.

The University of Michigan Hospitals recognizes that the HCFA mortality reporting methodology could be significantly improved through the implementation of our above recommendations. Thus, we urge restraint in the interpretation of the mortality data and in using it to compare hospitals with dissimilar mixes of patients.

Despite the above indicated limitations in the HCFA mortality study methodology, we are pleased with our current mortality statistics and believe they reflect the high quality of care provided to our patients.

Sincerely,

John D. Forsyth
Executive Director

Charles J. Krause, MD
Chief of Clinical Affairs

JDF:CJK:sjs
10/19/88

(BJmemo24)

VISITORS HOSPITAL

1301 MAIN ST
BUCHANAN, MI 49107

Medicare Hospital Provider Number: 230161

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	9	11	0 - 73	27	7	3 - 29
Cancer	0	-	-	1	100	2 -100
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	1	100	0 - 99	2	0	0 - 99
Pulmonary Disease	1	0	0 -100	4	25	0 - 95
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	2	0	0 - 94	3	0	4 - 79
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	1	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	2	0	0 -100
Musculoskeletal/Skin Conditions	0	-	-	1	0	0 -100
Neuropsychiatric/Sensory Disease	0	-	-	6	0	0 -100
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	42
Occupancy Rate (%):	62
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	11
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	0
Registered Nurses:	20
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

W A FOOTE MEMORIAL HOSP

205 N EAST AVE
JACKSON, MI 49201

Medicare Hospital Provider Number: 230092

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,095	12	10 - 14	2,905	12	10 - 14
Cancer	134	49	34 - 55	102	46	29 - 53
Cerebrovascular Accidents	111	23	17 - 35	139	27	20 - 37
Gastrointestinal Catastrophes	31	39	23 - 60	17	29	15 - 60
Infectious Disease	45	33	19 - 50	49	41	24 - 56
Metabolic/Electrolyte Disorders	32	19	15 - 47	43	28	11 - 43
Pulmonary Disease	113	27	15 - 35	117	21	16 - 34
Renal Failure	6	50	12 - 83	3	67	6 - 88
Severe Acute Heart Disease	106	45	30 - 51	101	43	30 - 52
Severe Chronic Heart Disease	166	23	16 - 31	157	25	16 - 32
Severe Trauma	9	44	5 - 67	7	14	6 - 66
Gastrointestinal Disease	196	2	2 - 7	197	4	1 - 8
Gynecologic Disease	30	0	0 - 99	26	0	0 -100
Low-Risk Heart Disease	383	4	2 - 7	330	3	2 - 7
Musculoskeletal/Skin Conditions	403	2	1 - 5	377	2	1 - 5
Neuropsychiatric/Sensory Disease	116	3	2 - 10	104	6	0 - 17
Urologic Disease	113	1	0 - 10	98	3	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	406
Occupancy Rate (%):	61
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	153
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	275
Licensed Practical Nurses:	150

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

WEST SHORE HOSPITAL

1465 E PARKDALE AVENUE
MANISTEE, MI 49660

Medicare Hospital Provider Number: 230060

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	594	11	9 - 15	589	14	9 - 16
Cancer	7	29	13 - 75	12	58	21 - 73
Cerebrovascular Accidents	24	29	13 - 49	24	29	16 - 52
Gastrointestinal Catastrophes	1	0	0 - 99	8	38	9 - 70
Infectious Disease	7	43	14 - 78	7	43	11 - 75
Metabolic/Electrolyte Disorders	10	30	3 - 63	6	33	9 - 75
Pulmonary Disease	28	25	8 - 42	35	17	11 - 39
Renal Failure	1	100	2 - 97	3	33	9 - 92
Severe Acute Heart Disease	40	20	25 - 52	29	48	24 - 60
Severe Chronic Heart Disease	37	35	8 - 40	34	21	10 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	51	0	1 - 11	57	4	0 - 21
Gynecologic Disease	5	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	94	3	1 - 12	81	1	1 - 9
Musculoskeletal/Skin Conditions	40	2	0 - 26	52	4	0 - 24
Neuropsychiatric/Sensory Disease	11	0	0 - 63	11	9	0 - 95
Urologic Disease	31	0	0 - 60	26	0	0 - 90

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	95
Occupancy Rate (%):	56
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	25
Percent of Physicians Who Are Board Certified Specialists:	56
Interns and Residents:	0
Registered Nurses:	45
Licensed Practical Nurses:	23

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No



WEST
SHORE
HOSPITAL

October 19, 1988

William L. Roper. M.D., Administrator
c/o Health Care Financing Administration
Hospital Mortality Information
P.O. Box 26684
Baltimore, Maryland 20207

RE: West Shore Hospital, Provider Number 230060

Dear Dr. Roper:

Thank you for the opportunity to review the mortality data concerning West Shore Hospital, to be released by the Health Care Financing Administration in December 1988.

West Shore Hospital has taken the opportunity to review that data and has the following comments.

1. One case was incorrectly listed as expiring on 9/16/87. Our records show this case to have been discharged on 9/16/87, seen as an outpatient on 9/17/87, transferred to a long term facility on 9/17/87 and having outpatient work at our facility as late as 4/14/88.

2. Regarding our mortality rate for the Diagnostic Category of Renal Failure, there was only one case. At the time of admission the patients' condition was terminal, and he did pass away.

3. It is again recommended that the patients' severity of illness, general health status, and stage of illness at the time of presentation to the hospital be included in future studies.

The Mortality Committee of West Shore Hospital has and continues to function in cooperation with other Medical Staff Committees, by reviewing all deaths which occur in the Hospital.

Concerning the Hospital Characteristics data for 1986, several figures appear to be incorrect as follows:

Beds (#):	Instead of 38, the total acute licensed beds are 95.
Occupancy Rate (%):	Based on average occupancy, and the above corrected number of licensed beds, this figure should be 38%.
Specialty Services:	This Hospital has a combination coronary and intensive care unit.

Staffing:

Total Number of Physicians: Should be 35 instead of 34.

Percent of Physicians Who Are Board Certified Specialists: According to our records it was 54% rather than 32%.

This concludes West Shore Hospital's comments on this data. In the event the data is revised prior to final publication and public distribution, West Shore Hospital would appreciate the opportunity to review and comment in advance of release.

Sincerely,

Burton O. Parks
Administrator

BOP:km

cc: Board of Trustees
Chief of Staff
Michigan Hospital Association

WESTLAND MEDICAL CENTER

2345 MERRIMAN RD
WESTLAND, MI 48185

Medicare Hospital Provider Number: 230098

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	357	14	7 - 15	421	17	8 - 16
Cancer	6	0	13 - 63	4	50	6 - 83
Cerebrovascular Accidents	7	29	8 - 70	12	50	9 - 62
Gastrointestinal Catastrophes	2	50	0 - 96	5	60	9 - 80
Infectious Disease	6	67	8 - 75	5	0	12 - 69
Metabolic/Electrolyte Disorders	11	18	6 - 57	10	40	3 - 65
Pulmonary Disease	15	27	6 - 52	28	14	11 - 41
Renal Failure	3	67	5 - 88	3	100	17 - 93
Severe Acute Heart Disease	15	47	17 - 64	19	63	20 - 62
Severe Chronic Heart Disease	23	22	7 - 43	19	32	6 - 49
Severe Trauma	0	-	-	4	75	4 - 80
Gastrointestinal Disease	16	0	0 - 60	21	5	0 -100
Gynecologic Disease	0	-	-	3	0	0 -100
Low-Risk Heart Disease	52	0	0 - 11	64	3	0 - 17
Musculoskeletal/Skin Conditions	37	0	0 - 31	32	6	0 - 89
Neuropsychiatric/Sensory Disease	15	7	0 -100	10	10	0 -100
Urologic Disease	8	13	0 -100	6	17	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	256
Occupancy Rate (%):	34
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	67
Percent of Physicians Who Are Board Certified Specialists:	45
Interns and Residents:	0
Registered Nurses:	87
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WHEELOCK MEM HOSP

7280 STATE RD
GOODRICH, MI 48438

Medicare Hospital Provider Number: 230111

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	180	11	7 - 17	180	8	8 - 17
Cancer	2	100	12 - 97	3	33	4 - 86
Cerebrovascular Accidents	3	33	2 - 86	6	0	10 - 60
Gastrointestinal Catastrophes	2	0	4 - 89	2	0	2 - 89
Infectious Disease	2	0	4 - 89	0	-	-
Metabolic/Electrolyte Disorders	5	0	4 - 64	5	20	7 - 75
Pulmonary Disease	9	33	7 - 65	9	22	10 - 64
Renal Failure	0	-	-	1	0	0 -100
Severe Acute Heart Disease	11	9	18 - 59	12	25	17 - 65
Severe Chronic Heart Disease	14	29	7 - 54	12	42	8 - 61
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	22	9	0 - 64	12	0	0 -100
Gynecologic Disease	0	-	-	1	0	0 -100
Low-Risk Heart Disease	53	6	0 - 25	53	0	1 - 10
Musculoskeletal/Skin Conditions	13	0	0 - 99	10	0	0 - 97
Neuropsychiatric/Sensory Disease	1	0	0 -100	1	100	0 -100
Urologic Disease	13	0	0 - 99	4	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	31
Occupancy Rate (%):	36
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	32
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	17
Licensed Practical Nurses:	1

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WILLIAM BEAUMONT HOSPITAL

3601 W 13 MILE ROAD
ROYAL OAK, MI 48072

Medicare Hospital Provider Number: 230130

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	6,987	11	10 - 14	6,780	12	10 - 14
Cancer	300	40	32 - 50	313	42	34 - 52
Cerebrovascular Accidents	254	20	21 - 33	195	26	21 - 35
Gastrointestinal Catastrophes	51	37	21 - 53	66	35	26 - 55
Infectious Disease	95	43	28 - 53	66	44	23 - 52
Metabolic/Electrolyte Disorders	132	31	19 - 43	130	20	15 - 38
Pulmonary Disease	217	23	20 - 35	251	29	19 - 35
Renal Failure	31	32	12 - 62	48	25	13 - 61
Severe Acute Heart Disease	301	33	32 - 46	298	37	32 - 47
Severe Chronic Heart Disease	277	25	19 - 31	250	30	18 - 32
Severe Trauma	16	13	11 - 52	13	23	10 - 59
Gastrointestinal Disease	376	2	1 - 5	407	2	1 - 5
Gynecologic Disease	80	0	0 - 66	72	0	0 - 83
Low-Risk Heart Disease	1,033	4	2 - 5	924	3	2 - 5
Musculoskeletal/Skin Conditions	645	1	1 - 4	623	2	1 - 5
Neuropsychiatric/Sensory Disease	413	2	1 - 6	476	1	1 - 5
Urologic Disease	370	1	0 - 5	312	2	0 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	929
Occupancy Rate (%):	76
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	761
Percent of Physicians Who Are Board Certified Specialists:	93
Interns and Residents:	259
Registered Nurses:	852
Licensed Practical Nurses:	146

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

Beaumont®

William Beaumont Hospital Medical Administration
Royal Oak

October 24, 1988

William L. Roper, M.D.
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

HCFA COMMENTS - ROYAL OAK
Medicare Provider No. 230130

William Beaumont Hospital-Royal Oak is a 929 bed teaching hospital in Southeast Michigan. Currently, all physicians admitted to the active attending staff are Board Certified. Physicians admitted to the associate staff are all board eligible and must take the Board examination within the period specified by the Specialty Board. Beaumont does not have a Shock/Trauma or Burn Unit as indicated in the hospital data section, but does have an active emergency center with 70,000 visits annually.

The HCFA mortality rates fell within the predicted range in all categories. However, we do not believe that mortality data, alone, should be regarded as a true indicator of the quality of patient care provided by a hospital.

Beaumont-Royal Oak has an extensive internal Quality Assurance program. Mortality review is carried out in every department. Our mortality review is focused on education -- both for the attending staff and for the young physicians in our residency programs. We ask the question 'could a different diagnostic and therapeutic regimen have improved the outcome?' What could we have done better?

This emphasis on education and quality improvement is present in all phases of patient care at Beaumont. Beaumont's Medical and Administrative staffs and our employees are committed to working together to create an environment where high quality, cost effective patient care is everyone's goal and everyone's concern.

Sincerely,

Federico A. Arcari, M.D.
Corporate Medical Director

/vlt

3601 West Thirteen Mile Road Royal Oak, Michigan 48072-2793 (313) 288-8000

WILLIAM BEAUMONT HOSPITAL

44201 DEQUINDRE
TROY, MI 48098

Medicare Hospital Provider Number: 230269

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,769	13	9 - 14	1,728	12	10 - 15
Cancer	43	42	24 - 55	49	45	26 - 57
Cerebrovascular Accidents	63	27	16 - 39	51	25	18 - 43
Gastrointestinal Catastrophes	27	26	14 - 52	21	38	17 - 60
Infectious Disease	14	36	15 - 64	25	16	22 - 55
Metabolic/Electrolyte Disorders	42	29	10 - 43	38	24	13 - 45
Pulmonary Disease	72	36	16 - 41	101	29	16 - 37
Renal Failure	12	50	18 - 79	7	43	14 - 83
Severe Acute Heart Disease	77	36	24 - 48	71	32	28 - 51
Severe Chronic Heart Disease	84	29	17 - 37	79	30	13 - 35
Severe Trauma	1	0	1 - 97	2	50	1 - 94
Gastrointestinal Disease	130	3	1 - 10	124	2	0 - 9
Gynecologic Disease	18	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	247	4	1 - 7	233	3	2 - 7
Musculoskeletal/Skin Conditions	168	2	0 - 9	163	2	1 - 8
Neuropsychiatric/Sensory Disease	22	5	0 - 78	23	4	0 - 86
Urologic Disease	113	3	0 - 17	105	0	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	189
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	375
Percent of Physicians Who Are Board Certified Specialists:	85
Interns and Residents:	13
Registered Nurses:	181
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WOMEN'S HOSPITAL

183 WEST STREET
BATTLE CREEK, MI 49016

Medicare Hospital Provider Number: 230102

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,074	13	9 - 14	1,181	12	9 - 15
Cancer	20	60	22 - 65	30	37	20 - 56
Cerebrovascular Accidents	49	22	14 - 39	65	22	17 - 39
Gastrointestinal Catastrophes	10	60	12 - 69	15	47	11 - 61
Infectious Disease	11	45	9 - 64	13	23	11 - 59
Metabolic/Electrolyte Disorders	20	35	11 - 55	21	5	11 - 41
Pulmonary Disease	72	31	14 - 38	83	18	13 - 33
Renal Failure	3	67	7 - 89	4	50	14 - 93
Severe Acute Heart Disease	42	33	23 - 53	48	56	26 - 55
Severe Chronic Heart Disease	50	24	12 - 37	54	30	13 - 39
Severe Trauma	1	0	0 -100	1	0	3 - 98
Gastrointestinal Disease	73	7	0 - 24	87	2	1 - 11
Gynecologic Disease	9	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	149	7	1 - 13	111	4	1 - 11
Musculoskeletal/Skin Conditions	74	1	0 - 14	124	2	1 - 8
Neuropsychiatric/Sensory Disease	12	0	0 - 99	31	13	0 - 92
Urologic Disease	67	0	0 - 18	55	4	0 - 56

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	210
Occupancy Rate (%):	45
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	129
Percent of Physicians Who Are Board Certified Specialists:	62
Interns and Residents:	0
Registered Nurses:	187
Licensed Practical Nurses:	38

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WYANDOTTE HOSPITAL & MEDICAL CENTER

2333 BIDDLE AVE
WYANDOTTE, MI 48192

Medicare Hospital Provider Number: 230146

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,922	14	11 - 15	1,845	12	10 - 15
Cancer	59	51	27 - 56	62	55	26 - 54
Cerebrovascular Accidents	75	27	17 - 38	91	24	18 - 38
Gastrointestinal Catastrophes	19	32	21 - 64	13	38	20 - 71
Infectious Disease	32	28	18 - 52	33	15	22 - 52
Metabolic/Electrolyte Disorders	41	29	14 - 46	35	11	14 - 43
Pulmonary Disease	109	38	17 - 37	84	23	16 - 37
Renal Failure	11	45	13 - 75	8	50	14 - 81
Severe Acute Heart Disease	75	40	26 - 50	69	45	25 - 50
Severe Chronic Heart Disease	133	26	19 - 35	118	27	17 - 34
Severe Trauma	8	25	7 - 67	4	50	4 - 82
Gastrointestinal Disease	128	3	1 - 9	130	1	1 - 7
Gynecologic Disease	14	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	283	3	1 - 6	271	2	1 - 6
Musculoskeletal/Skin Conditions	177	1	1 - 5	158	3	1 - 8
Neuropsychiatric/Sensory Disease	33	3	0 - 58	40	0	0 - 28
Urologic Disease	70	1	0 - 16	68	0	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	359
Occupancy Rate (%):	78
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	128
Percent of Physicians Who Are Board Certified Specialists:	85
Interns and Residents:	0
Registered Nurses:	271
Licensed Practical Nurses:	51

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

WYANDOTTE
HOSPITAL AND MEDICAL CENTER
An Affiliate of Henry Ford Health Care Corporation

2333 Biddle Avenue
Wyandotte, Michigan 48192

(313) 284-2400

October 18, 1988

Medicare Provider: 230146

Health Standards and Quality Bureau, HCFA
Attn: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

The 1987 Medicare Hospital Mortality Information pertinent to Wyandotte Hospital & Medical Center has been reviewed. Corrections in the demographic information should be made to reflect the actual clinical make up of the institution prior to public release of the 1987 data. Corrections are follows:

	HCFA Report	Actual
Beds	148	359
Total Number of Physicians	129	205
Coronary Care Unit	No	Yes
Special Care Unit	-	Yes

In reviewing the information provided, it has been noted that our facility is within the expected range for our type and size hospital. With the changes noted above, it is assumed that the predicted range may change and our rates would be even more favorable. The only mortality rate above the expected range was approximately one (1) case in the pulmonary disease category. Wyandotte Hospital & Medical Center has on its staff a pulmonologist who treats many complex and terminal cases. The geographic area from which our patients live is comprised of numerous industrial facilities, especially chemical plants and steel mills. It can be assumed by the make up of our community (blue collar, industrial workers) that the incidence of chronic lung disease is higher than in other parts of the state and nation. This type of patient is also less likely to go to a tertiary care center when terminal and tends to access their community hospital, especially when they are able to receive the same or more appropriate care from our staff.

After review of the listed cases, it has been determined that 97% of the deaths were expected. (Statistics attached are for information, not for publication). The Medical Staff of Wyandotte Hospital & Medical Center has been performing mortality review for the past three years as a part of its quality assessment program, which includes mortality conferences on all unexpected deaths.

It is accepted that mortality review, along with other quality assessment functions, is but one way for our medical staff to strive to improve the quality of patient care at Wyandotte Hospital & Medical Center.

Thank you for this opportunity to comment on the statistics compiled by HCFA and to incorporate their findings into our Quality Assessment Program.

Sincerely,

Thomas G. McDonald, M.D.
President WH&MC Medical Staff

John C. Fitch
President and Chief Executive Officer

Attachment: Review Statistics

YALE COMMUNITY HOSPITAL INC

420 NORTH STREET
YALE, MI 48097

Medicare Hospital Provider Number: 230232

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	117	15	10 - 23	133	17	9 - 23
Cancer	4	50	7 - 83	5	80	12 - 79
Cerebrovascular Accidents	10	30	5 - 61	7	57	7 - 72
Gastrointestinal Catastrophes	0	-	-	1	0	0 - 99
Infectious Disease	2	50	1 - 93	3	33	6 - 87
Metabolic/Electrolyte Disorders	1	100	0 - 97	3	33	2 - 86
Pulmonary Disease	25	12	8 - 38	28	11	7 - 35
Renal Failure	0	-	-	4	75	13 - 90
Severe Acute Heart Disease	4	0	9 - 73	3	33	5 - 86
Severe Chronic Heart Disease	12	8	9 - 49	11	45	6 - 62
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	7	0	0 -100	8	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	10	20	0 - 76	15	0	0 - 51
Musculoskeletal/Skin Conditions	6	0	0 -100	9	0	0 -100
Neuropsychiatric/Sensory Disease	1	0	0 -100	4	0	0 -100
Urologic Disease	1	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	22
Occupancy Rate (%):	23
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	15
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	7
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ZEELAND COMMUNITY HOSPITAL

129 SOUTH TAFT STREET
ZEELAND, MI 49464

Medicare Hospital Provider Number: 230003

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	402	15	10 - 17	438	9	9 - 15
Cancer	9	33	16 - 73	12	33	15 - 66
Cerebrovascular Accidents	23	22	13 - 48	26	27	15 - 49
Gastrointestinal Catastrophes	4	50	5 - 83	1	0	0 - 98
Infectious Disease	6	67	8 - 75	7	29	5 - 69
Metabolic/Electrolyte Disorders	12	33	8 - 61	8	13	5 - 60
Pulmonary Disease	31	19	14 - 44	29	21	11 - 43
Renal Failure	1	0	0 -100	0	-	-
Severe Acute Heart Disease	20	45	22 - 64	14	21	21 - 65
Severe Chronic Heart Disease	23	17	9 - 42	31	26	11 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	48	15	0 - 36	38	5	0 - 39
Gynecologic Disease	3	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	45	11	0 - 48	56	2	1 - 14
Musculoskeletal/Skin Conditions	16	0	0 - 41	31	3	0 - 64
Neuropsychiatric/Sensory Disease	4	0	0 -100	7	0	0 -100
Urologic Disease	32	0	0 - 67	34	0	0 - 83

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	61
Occupancy Rate (%):	44
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	37
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	0
Registered Nurses:	42
Licensed Practical Nurses:	28

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Technical Appendix

TECHNICAL APPENDIX

METHODOLOGY

The Data Base

The data that are analyzed in this report are drawn from the MEDPAR file, which is assembled and updated quarterly by the Bureau of Data Management and Strategy in HCFA. This file is constructed from information on hospitalizations submitted to HCFA by hospitals through fiscal intermediaries. Data obtained from the Social Security Administration also contribute to the file. The data include the age, sex and date of death of each Medicare beneficiary. Because each beneficiary is assigned a unique health insurance claim number, it is possible to link hospitalizations longitudinally. Prior hospitalizations and readmissions can be found, as well as the date of death, whenever and wherever it occurred.

The hospitalizations in this file are segregated by the year of discharge. The data used in these analyses were drawn from the 1985, 1986 and 1987 discharges. The update cycles used for these years were 12/31/87, 6/10/88 and 6/10/88, respectively.

The process of data management consisted of selecting discharges from acute-care hospitals, calculating analytical variables that required data from prior hospitalizations and selecting the last discharge for each beneficiary for 1986 and 1987. The following rules were used to select discharges from acute-care hospitals:

1) Include only discharges from short-term (general and specialty) hospitals. These hospitals have a 0 in the third position of their "provider number."

2) Exclude discharges from psychiatric units, rehabilitation units, swing-beds and alcohol/drug units. These records have "provider codes" of S, T, U and V, respectively.

3) Exclude discharges from special cost centers. These are designated by a 9 in the fourth position of the "provider number."

4) Exclude discharges where the date of death precedes the date of admission, because these are obvious data errors.

Variables dependent on data from prior hospitalizations were calculated as follows:

1) For each beneficiary, sort the discharges in descending order by "discharge date" and "admission date" and stack the discharges for the current and prior years.

2) For the last discharge in the current year, determine whether the beneficiary at admission was transfered from another hospital. Operationally, the "discharge destination" for the prior discharge must be coded as a discharge to a short-term hospital, and the "discharge date" for the prior discharge must be no more than one day prior to the "admission date" for the last discharge.

3) For each discharge, use the principal diagnosis (the first "diagnostic code") to determine the diagnostic category as defined in Table 2 of the Introduction. Diagnoses that are not listed in this table are placed in a residual category of intermediate risk.

4) For the last discharge of the current year, count the number of admissions by diagnostic category that occurred within the 182 days prior to the admission date for this discharge.

Subsequently, the last discharges for 1986 and 1987 were selected and segregated by diagnostic categories into separate files for analysis. Only hospitals that had discharges in 1987 were considered for publication. Canadian and emergency hospitals were excluded. Six other hospitals were excluded because they terminated operations prior to 1987 or because their "provider number" was invalid.

Mortality Rates

In this project, the definition of mortality used to calculate mortality rates was death within 30 days of admission. The choice of a fixed period of 30 days after admission avoids biases that might occur if in-hospital deaths only were counted. Sufficient followup is available to permit complete estimation of mortality rates based upon this choice. Choosing a specific discharge avoids multiple counts of the same death. The last discharge for the year is biased to higher short-term risk.

Diagnostic Categories

Lists of the ICD-9-CM codes included in each diagnostic category are found in Table 2 of the Introduction to this report. The lists were constructed to represent diagnostic categories that are medically coherent and rather homogeneous with respect to risk of death.

Grouping was performed by combining clinically related diagnostic clusters when associated mortality rates were similar to one another. For each primary diagnosis, these rates were calculated from the 5% random sample of Medicare discharges for 1985 and 1986. For instance, Klebsiella pneumonia (482.0, 1385 patients, observed mortality = 24.3%) and Pseudomonas pneumonia (482.1, 1416 patients, observed mortality = 25.2%) were combined in the Pulmonary Disease category, as were subarachnoid hemorrhage (430, 525 patients, observed mortality = 47.8%) and intracerebral hemorrhage (431, 2883 patients, observed mortality = 42.9%), in the Cerebrovascular Accidents category.

These aggregations are generally analogous to the categories used in the 1987 analysis, but are more risk-homogeneous. In some cases, risk categories were expanded to incorporate a broader range of related conditions associated with similar risks of subsequent mortality, such as expanding ophthalmology to include psychiatric and other sensory system disorders or expanding low risk orthopedic conditions to include low risk dermatologic and muscular disorders.

In other instances, conditions were transferred to new categories based on empirical evidence that associated mortality rates were higher or lower than previously anticipated. For example, cancer of the salivary gland, gums, mouth, and oropharynx (142-146, observed mortality = 8.8%) was moved from high risk cancer to the intermediate risk category (average mortality = 8.5%), paroxysmal ventricular tachycardia (427.1, observed mortality 8.9%) was moved from the severe acute heart disease to the intermediate risk category, acute and chronic gastric ulcers with perforation, with and without hemorrhage (531.1, 531.2, 531.5, 531.6, observed mortality = 21.8%) was moved from low risk GI disease to GI catastrophe, pneumonia due to H. influenzae (482.2, observed mortality = 8.6%) was moved from high risk pulmonary to the intermediate risk category, fracture of the femur (820, 821, observed mortality = 6.1%) was moved from high risk trauma to the intermediate risk category, and chronic glomerulonephritis and other nephritis and nephropathy (582, 583, observed mortality 2.2%) was moved from high risk renal to low risk urologic disease. The new categories were reviewed for clinical and coding consistency and face validity, and final adjustments were made. Final adjustments included combining myocardial infarctions in a single risk group since coding variations among institutions made separation into different categories problematic, and removing italicized ICD-9-CM diagnoses from named risk groups since they are not valid principal diagnoses.

Demographic Variables

As in 1987, age and sex variables were used to characterize each patient. The sex variable is an indicator variable, as shown in Table 1. The patient's age was expressed in the 1987 Mortality Release by indicator variables in six categories, 65, 65-69, 70-74, 75-79, 80-84, and 85. For the 1988 Mortality Release, the age relative to 65 years and the square of this variable, as shown in Table 1, replaced the categorical age variables.

Comorbidity Variables

As in 1987, the secondary diagnoses (0-4 in number, "diagnostic codes" 2-5) were used to construct variables indicating the presence of comorbidities. The eight comorbidity indicator variables used in the analyses are: diabetes (DI), chronic pulmonary disease (OP), cancer (CA), chronic liver disease (LV), chronic renal disease (RN), cerebral vascular degeneration or chronic psychosis (CE), hypertensive disease (HY) and chronic cardiovascular disease (CV). The ICD-9-CM codes defining these variables are the same as were used in 1987 and are listed in Table 3 of the Introduction.

Prior History Variables

In the 1987 Mortality Release, the number of prior admissions was not based on a fixed interval of time prior to the admission date for the last discharge of the year, but included only prior admissions with discharges in the same calendar year (1986). Also all admissions were counted without any distinction among the risks associated with various prior admissions. In the 1988 Mortality Release, prior admissions are counted for a fixed interval of six months prior to the admission date for the last discharge of the year, and separate counts of prior admissions are made for three risk levels. They are admissions with high, low and intermediate risk. In Table 2 of the Introduction, diagnostic categories are defined as high risk or low risk. The intermediate risk category is composed of ICD-9-CM codes not listed in that table. Indicator variables are defined for the high risk category, as shown in Table 1, as PH1 if there was one prior high risk admission, PH2 if there were two and PH3M if there were three or more. Similar variables are defined for low risk (PL1, PL2, PL3M) and intermediate risk (PU1, PU2, PU3M) admissions. The indicator variable TRIN records whether or not the patient was transfered into the hospital from another acute-care hospital.

Analytic Techniques

The principal analytic tool was logistic regression (see, for example, Cox (1970)). Because the diagnostic categories are mutually exclusive, the analyses to ascertain the influence of patient characteristics (demographics, comorbidities and prior histories) were carried out separately for each category.

The probability π that a patient dies within 30 days of admission depends on the patient's characteristics x_i. Table 1 lists the covariates used in the logistic model for this year's analysis. Generally the same variables were used across all diagnostic categories. There are some exceptions. For example, the variable sex is not included as a covariate in the analyses for the diagnostic category gynecologic disease. In all other cases, the model is the same, with the occasional omission of one or more variables because of estimation difficulties (See Tables 2 and 3).

The dependence of π on these variables is specified by a logistic model:

$$\log \ (\pi/(1-\pi)) = \Sigma_i \beta_i x_i .$$

The regression coefficients β_i are estimated by the method of maximum likelihood. It is possible then to estimate the probability of dying for a patient from his or her characteristics x_i. By averaging over all the patients for whom treatment in a given hospital is being evaluated, the estimated mortality rate for that hospital is found. This analysis is carried out for each individual diagnostic category (the 16 explicitly defined categories as well as the residual category). The coefficients for each diagnostic category are shown in Table 2 for the 1987 data and in Table 3 for the 1986 data. Blank spaces in these tables mean that the corresponding variables were not used in the model. This is the same as fixing the parameter estimates for the unused variables at zero. Calculations were performed using the SAS procedure LOGIST as described by the SAS Institute (1986).

In addition to the estimates of regression coefficients for the logistic regression model, Tables 2 and 3 also display the model chi-square, based on the likelihood ratio, the number of cases and the number of deaths, for each of the diagnostic categories. The model chi-square has 22 degrees of freedom in most cases. The exceptions occur when one or more variables are removed from the model. In these cases, the degrees of freedom are reduced by one for each variable removed from the model. In all cases, the model chi-square is highly significant ($P < 0.001$). Note that the coefficients from 1987 and 1986 data are generally similar, as can be seen clearly in Table 4. The major differences occur in low risk categories or when there are only a few cases associated with the variable. In these situations, the parameter estimates are less stable. For example, there are relatively few cases associated with the variables for three or more prior admissions within six months. The regression coefficients in Tables 2 and 3 were used to estimate the probability of death within 30 days of the last admission in 1987 or 1986 for a 1987 "average case" for each of the diagnostic categories, as shown in Table 4. The "average case" is a hypothetical "patient" whose characteristics correspond to average values of each variable within a diagnostic category. The mortality rate for this 1987 "average case" using the 1986 and 1987 coefficients is displayed in Table 4 along with the average observed mortality rate. Note the similarity of the data for 1986 and 1987. Note also that the average observed and the average predicted mortality rates must be equal, but that the predicted mortality rate for the "average case" differs from them somewhat because of the inverse logit transformation that is needed to convert the sum of the products of the average values of the variables and the regression coefficients to a probability of dying. Since there is no way to know that a given admission will result in the last discharge of the year, these equations generally should not be used for predicting the outcome for individual cases.

The second quantity required of the analyses was an estimate of the uncertainty in the mortality rate expressed as a range of predicted rates encompassing a specified proportion (95%) of the probable values. For this it is necessary to compute the variance of the probability of death at a given hospital.

There are two components of variance included in our calculation of the range of mortality for a hospital. The first is the sampling variance, which is estimated by:

$$SV_j = B_j(1-B_j) \; / \; N_j,$$

where

$$B_j = (N_j p_j + 1) \; / \; (N_j + 2),$$

and p_j is the observed proportion of persons who had died among the N_j persons at risk, within a specified diagnostic category (or overall). B_j is a Bayesian estimate of the probability of dying.

The second component arises from the systematic differences among hospitals in the identified factors included in the logistic model. This contribution to the variance is estimated by:

$$IHV_j = (1-(1/N_j))\; V$$

where V, the inter-hospital variance, is

$$V = \Sigma_j \; (P_j - \bar{P})^2 \; (N_j / \; N_t).$$

P_j is the predicted mortality rate and N_j is the number of cases at risk at hospital j. $N_t = \Sigma_j \; N_j$ is the total number of cases at risk and $\bar{P} = (\Sigma_j \; N_j \; P_j \;) \; / \; N_t$ is the average mortality rate, in the category under consideration. To see how this formula arises, consider the basic identity (Kendall, Stuart and Ord, 1983, p.212):

$$Var(x) = \; E_\theta \; \{Var_{x|\theta}(x)\} \; + \; \; Var_\theta \; \{E_{x|\theta}(x)\}.$$

When this formula is applied to a binomial random variable x, the result is

$$Var(x) \; = n \; E_\theta \; \{\theta\}\{1-E_\theta\{\theta\}\) \; + \; n(n-1) \; Var_\theta\{\theta\}$$

as given by Mosimann (1962, equation 36). From this it follows that

$$\mathrm{Var}(x/n) = \mathrm{Var}(x) / n^2 = (E_\theta\{\theta\}(1-E_\theta\{\theta\})) / n + (1-(1/n))\ \mathrm{Var}\{\theta\}$$

where $V\{\theta\} = V$, the constant inter-hospital variance. Values of V for each diagnostic category are in Table 4.

The ranges of predicted mortality rates given in this publication encompass 95% of the probable values on a logit scale, which ensures that the range neither goes below zero nor above 100%. On the logit scale, the range of predicted values P is given by:

$$R_j = \log(P_j/(1-P_j)) \pm 1.96(\sqrt{SV_j + IHV_j}) / (P_j(1-P_j)).$$

Retransformed to the probability scale, the upper end of the range is:

$$\exp(R_+) / (1 + \exp(R_+))$$

and the lower end is:

$$\exp(R_-) / (1 + \exp(R_-))$$

where R_+ is the value of R taken with the + sign and R_- is the value of R taken with the - sign.

The tabulation of the numbers of cases at risk (i. e., the number of patients whose last discharge in 1987 was from the given hospital), of the percentage of these persons who died within 30 days of the date of admission for that hospitalization, and of the range of predicted mortality rates encompassing 95% of the probable values on the logit scale forms the core of the present publication. A similar display is also included for the 1986 data.

An implication that bears importantly on year-to-year stability of rankings is that there remain important sources of variability in outcomes associated with variations in patient characteristics (such as severity of illness) and other factors that have not been taken into account in the models used in the present analyses.

References

David R. Cox (1970) The Analysis of Binary Data, London: Chapman and Hall.

Maurice Kendall, Alan Stuart and J. Keith Ord (1983) The Advanced Theory of Statistics, Vol. 3, 4th Ed., New York: Macmillan.

James E. Mosimann (1962) "On the compound multinomial distribution, the multivariate β-distribution, and correlations among proportions," Biometrika, 49, 65-82.

SAS Institute Inc. (1986) SUGI Supplemental Library User's Guide, Version 5 Edition, Cary, NC: SAS Institute, Inc.

TABLE 1

Covariates used in the logistic models for the 1988 Hospital Mortality Release. Generally the same variables are used for all diagnostic categories. The two-letter codes for comorbidities are defined in terms of ICD-9-CM codes in Table 3 of the Introduction to this report.

Intercept Constant added into the logistic model in all cases.

Demographics

RAG	Age of patient in years divided by 65.
RAGSQ	RAG squared.
SEX	An indicator variable: Male 0 and Female 1.

Comorbidities (Indicator variables)

DI	1 if patient has diabetes, 0 if not.
OP	1 if chronic pulmonary disease, 0 if not.
CA	1 if cancer, 0 if not.
LV	1 if chronic liver disease, 0 if not.
RN	1 if chronic renal disease, 0 if not.
CE	1 if cerebrovascular degeneration or chronic psychosis, 0 if not.
HY	1 if hypertensive disease, 0 if not.
CV	1 if chronic cardiovascular disease, 0 if not.

Prior Histories (Indicator variables)

PH1	1 if patient has had 1 recent high-risk admission, 0 if not.
PH2	1 if patient has had 2 recent high-risk admissions, 0 if not.
PH3M	1 if patient has had 3 recent high-risk admissions, 0 if not.
PL1	1 if patient has had 1 recent low-risk admission, 0 if not.
PL2	1 if patient has had 2 recent low-risk admissions, 0 if not.
PL3M	1 if patient has had 3 recent low-risk admissions, 0 if not.
PU1	1 if patient has had 1 recent medium-risk admission, 0 if not.
PU2	1 if patient has had 2 recent medium-risk admissions, 0 if not.
PU3M	1 if patient has had 3 recent medium-risk admissions, 0 if not.
TRIN	1 if patient was transfered into the hospital, 0 if not.

Recent means within six months (182 days) before the admission date on the last discharge.

Table 2

1987

Parameter Estimates

Conditions:

CA - Cancer
CE - Cerebrovascular accidents
EY - Neuropsychiatric and sensory disease
GC - Gastrintestinal catastrophes
GI - Gastrointestinal disease
GU - Urologic disease
GY - Gynecologic disease
HL - Low-risk heart disease
HM - Severe chronic heart disease
HS - Severe acute heart disease
ME - Metabolic/electrolyte disturbances
OP - Muskuloskeletal and cutaneous conditions
PN - Pulmonary disease
RN - Renal failure
SE - Infectious disease
TR - Severe trauma
UN - All other conditions

Table 2.1

PARAMETER ESTIMATES(EST) AND STANDARD ERRORS(SE) FROM THE 1988 MODEL APPLIED TO THE LAST DISCHARGES FOR 1987

CONDITIONS	CA		CE		EY		GC		GI		GU	
VARIABLES	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE
INTERCEPT	-0.9591	0.1846	1.1997	0.2163	-5.2813	0.2800	-2.3087	0.2017	-3.5635	0.2663	-4.7226	0.4824
RAG	-1.6335	0.3285	-6.6151	0.3659	-1.5611	0.5229	-0.4696	0.3734	-5.5355	0.4572	-5.5282	0.8185
RAGSQ	1.3503	0.1465	3.7120	0.1544	2.2297	0.2447	1.2330	0.1746	4.2574	0.1972	4.4686	0.3499
SEX	-0.2402	0.0094	-0.0476	0.0099	-0.5750	0.0287	-0.1175	0.0199	-0.1243	0.0185	0.5935	0.0350
DI	-0.1024	0.0258	0.1020	0.0165	0.1759	0.0587	-0.1638	0.0415	0.2683	0.0400	0.4540	0.0636
OP	-0.0561	0.0141	0.1279	0.0185	0.3559	0.0436	0.0051	0.0359	0.2458	0.0285	0.1487	0.0535
CA	0.5768	0.0093	0.8097	0.0252	1.9331	0.0441	1.0668	0.0340	1.6400	0.0301	1.4296	0.0452
LV	1.3567	0.0417	0.9674	0.0741	0.8902	0.1032	0.9094	0.0259	1.3731	0.0523	1.4221	0.1900
RN	1.0472	0.0364	0.8796	0.0314	1.6159	0.0678	0.6804	0.0411	1.4903	0.0431	1.4730	0.0594
CE	-0.0632	0.0394	-0.6277	0.0291	0.2072	0.0601	-0.5066	0.0825	0.0970	0.0636	0.5856	0.0843
HY	-0.3680	0.0492	-0.0778	0.0226	-0.0419	0.1010	-0.3043	0.0760	-0.1481	0.0642	-0.0122	0.1146
CV	0.3520	0.0118	0.3532	0.0097	0.6803	0.0304	0.5708	0.0221	0.7706	0.0186	0.9333	0.0323
PH1	0.9049	0.0111	0.4668	0.0149	1.0171	0.0409	0.4431	0.0263	1.0073	0.0263	1.1523	0.0425
PH2	1.3110	0.0199	0.8399	0.0344	1.6964	0.0753	0.5912	0.0461	1.4578	0.0538	1.5987	0.0906
PH3M	1.5586	0.0339	1.2198	0.0752	1.9332	0.1458	0.5752	0.0666	1.8720	0.1031		
PU1	0.4216	0.0129	0.3815	0.0163	0.5417	0.0398	0.2922	0.0263	0.5258	0.0251	0.6359	0.0416
PU2	0.6721	0.0242	0.6588	0.0401	0.9497	0.0767	0.4900	0.0517	0.9993	0.0487	1.0869	0.0809
PU3M	0.8003	0.0291	0.7082	0.0782	1.4732	0.1082	0.5197	0.0815	1.0673	0.0858	1.5890	0.1328
TRIN	-0.2626	0.0293	-0.0471	0.0357	0.5169	0.1053	0.3129	0.0627	0.6705	0.0692	0.6464	0.1219
PL1	0.1573	0.0162	0.1208	0.0159	0.1455	0.0378	0.1427	0.0301	0.2183	0.0250	0.1653	0.0433
PL2	0.1772	0.0437	0.1758	0.0411	0.1414	0.0801	0.1743	0.0731	0.3797	0.0533	0.4906	0.0895
PL3M	0.1269	0.1044	0.3631	0.0888	0.0705	0.1537	0.1452	0.1591	0.2971	0.1094	0.8340	0.1643
TOTAL NUM.	216,565		240,896		245,185		52,907		451,765		277,784	
DEATHS	89,692		63,407		5,633		18,329		13,776		4,634	
MODEL CHI-SQ.	23,809		11,842		7,524		5,215		16,232		7,689	

Table 2.2

PARAMETER ESTIMATES(EST) AND STANDARD ERRORS(SE) FROM THE 1988 MODEL APPLIED TO THE LAST DISCHARGES FOR 1987

CONDITIONS	GY		HL		HM		HS		ME		OP	
VARIABLES	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE
INTERCEPT	-9.1786	0.3010	-3.1645	0.2327	-1.9582	0.1666	-0.3864	0.1743	-3.2048	0.2537	-3.3135	0.2154
RAG			-4.6780	0.4036	-1.7762	0.2847	-3.4967	0.3051	0.2668	0.4302	-5.8135	0.3778
RAGSQ	2.3124	0.2106	3.3811	0.1750	1.7348	0.1215	2.6778	0.1335	0.8351	0.1827	4.2440	0.1665
SEX			-0.2982	0.0129	-0.2375	0.0092	-0.0383	0.0088	-0.4303	0.0160	-0.4685	0.0192
DI	0.9843	0.2244	0.2989	0.0241	-0.0471	0.0155	0.1744	0.0155	-0.0804	0.0329	0.3664	0.0349
OP	0.1323	0.2781	0.2005	0.0200	0.0032	0.0117	-0.1526	0.0142	0.0243	0.0273	0.4635	0.0297
CA	2.1844	0.1861	1.5089	0.0244	0.8028	0.0211	0.5563	0.0256	1.6174	0.0200	1.8846	0.0285
LV	1.8871	0.5508	1.2272	0.0787	0.7108	0.0435	1.0323	0.0751	0.8660	0.0693	1.5729	0.0798
RN	2.2304	0.3106	1.1843	0.0297	0.7261	0.0159	0.8167	0.0253	0.6416	0.0304	1.6414	0.0448
CE	0.3470	0.4731	0.0348	0.0444	-0.0814	0.0318	-0.5037	0.0376	-0.2641	0.0316	0.2949	0.0490
HY	0.3073	0.3791	-0.1699	0.0362	-0.3986	0.0280	-0.2861	0.0250	-0.2003	0.0612	0.0462	0.0641
CV	1.3402	0.1349	0.5437	0.0133	0.0804	0.0092	0.2520	0.0093	0.6250	0.0174	0.9847	0.0193
PH1	1.6812	0.1924	0.8796	0.0162	0.6334	0.0106	0.4255	0.0132	0.5445	0.0190	1.0584	0.0288
PH2	2.9031	0.4044	1.4401	0.0306	0.9506	0.0165	0.8011	0.0285	0.7757	0.0346	1.4467	0.0623
PH3M			2.0347	0.0535	1.1726	0.0231	1.1723	0.0571	1.0184	0.0616	2.1872	0.1133
PU1	0.9758	0.1835	0.4561	0.0188	0.3210	0.0128	0.3565	0.0153	0.3166	0.0200	0.4935	0.0279
PU2	1.1076	0.4287	0.8606	0.0392	0.5318	0.0270	0.6332	0.0372	0.4251	0.0382	0.9696	0.0545
PU3M	1.5589	0.6383	1.1950	0.0658	0.6545	0.0489	0.9770	0.0669	0.6245	0.0574	1.4334	0.0845
TRIN	1.3584	0.8502	0.6728	0.0247	0.4610	0.0362	-0.4480	0.0235	0.3256	0.1310	0.8660	0.0862
PL1	-0.3050	0.2295	0.1905	0.0159	0.1086	0.0133	0.1103	0.0139	0.0448	0.0232	0.0407	0.0270
PL2	0.6264	0.4710	0.2546	0.0299	0.1217	0.0300	0.1501	0.0323	0.0580	0.0568	0.0861	0.0616
PL3M			0.4261	0.0480	0.2047	0.0572	0.3722	0.0619	-0.1159	0.1335	-0.0071	0.1383
TOTAL NUM.	61,870		818,849		311,444		246,665		105,282		585,696	
DEATHS	273		27,786		70,762		94,172		26,485		13,186	
MODEL CHI-SQ	667		21,104		19,097		14,457		14,966		18,616	

Table 2.3

PARAMETER ESTIMATES(EST) AND STANDARD ERRORS(SE) FROM THE 1988 MODEL
APPLIED TO THE LAST DISCHARGES FOR 1987

CONDITIONS	PN		RN		SE		TR		UN	
VARIABLES	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE
INTERCEPT	-2.6009	0.1260	-4.7164	0.2568	-2.2654	0.1841	-1.4983	0.4342	-3.5263	0.0652
RAG	-1.1518	0.2161	2.4880	0.4744	-0.2282	0.3274	-1.3583	0.7978	-2.4574	0.1146
RAGSQ	1.7081	0.0927	0.5723	0.2186	0.9669	0.1465	1.4598	0.3676	2.4350	0.0507
SEX	-0.3345	0.0086	-0.1322	0.0252	-0.1198	0.0162	-0.2443	0.0435	-0.2930	0.0052
DI	0.1040	0.0182	0.1180	0.0406	-0.0070	0.0271	-0.0629	0.1099	0.1689	0.0104
OP	-0.3019	0.0103	0.2304	0.0498	-0.0529	0.0308	-0.2491	0.0836	0.2396	0.0074
CA	1.0701	0.0137	0.9455	0.0430	0.7369	0.0237	0.8208	0.1094	1.1744	0.0070
LV	0.6490	0.0482	1.2631	0.1042	0.9764	0.0597	1.1583	0.2114	1.4285	0.0192
RN	0.8493	0.0215	-0.0693	0.0369	0.7499	0.0313	1.1097	0.1679	1.0659	0.0115
CE	0.0284	0.0187	-0.0107	0.0758	-0.3244	0.0425	-0.4878	0.1103	0.0186	0.0146
HY	-0.2986	0.0327	-0.3446	0.0479	-0.3185	0.0673	-0.1716	0.1790	-0.2222	0.0186
CV	0.3876	0.0086	0.6419	0.0259	0.5171	0.0175	0.5752	0.0469	0.6601	0.0053
PH1	0.6818	0.0105	0.3766	0.0300	0.5626	0.0199	0.1086	0.0694	0.9182	0.0069
PH2	0.9608	0.0192	0.6510	0.0520	0.7310	0.0368	0.3808	0.1633	1.3266	0.0137
PH3M	1.2271	0.0338	1.0370	0.0839	0.9597	0.0658	0.9237	0.3318	1.6233	0.0251
PU1	0.5299	0.0114	0.3242	0.0317	0.4128	0.0199	0.2128	0.0718	0.4829	0.0064
PU2	0.8180	0.0227	0.4157	0.0577	0.6202	0.0363	0.4006	0.1684	0.7516	0.0109
PU3M	1.0552	0.0378	0.7940	0.0869	0.7960	0.0558	0.8103	0.3126	0.7356	0.0146
TRIN	0.1327	0.0419	0.1808	0.0533	0.4457	0.0721	-0.1722	0.1057	0.4225	0.0173
PL1	0.2341	0.0135	0.1925	0.0355	0.1490	0.0235	-0.0263	0.0720	0.1152	0.0078
PL2	0.2659	0.0337	0.3193	0.0797	0.2329	0.0566	-0.2338	0.1915	0.1074	0.0187
PL3M	0.2878	0.0754	0.4619	0.1810	0.2501	0.1322	0.2520	0.3722	0.0855	0.0407
TOTAL NUM.	339,986		33,325		77,856		11,777		2,200,419	
DEATHS	87,977		12,531		27,664		3,306		187,048	
MODEL CHI-SQ	38,547		6,125		6,964		621		144,234	

Table 3

1986

Parameter Estimates

Conditions:

CA - Cancer
CE - Cerebrovascular accidents
EY - Neuropsychiatric and sensory disease
GC - Gastrintestinal catastrophes
GI - Gastrointestinal disease
GU - Urologic disease
GY - Gynecologic disease
HL - Low-risk heart disease
HM - Severe chronic heart disease
HS - Severe acute heart disease
ME - Metabolic/electrolyte disturbances
OP - Muskuloskeletal and cutaneous conditions
PN - Pulmonary disease
RN - Renal failure
SE - Infectious disease
TR - Severe trauma
UN - All other conditions

Table 3.1

PARAMETER ESTIMATES(EST) AND STANDARD ERRORS(SE) FROM THE 1988 MODEL
APPLIED TO THE LAST DISCHARGES FOR 1986

CONDITIONS	CA		CE		EY		GC		GI		GU	
VARIABLES	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE
INTERCEPT	-0.6935	0.1711	1.2702	0.2119	-5.0334	0.2787	-2.4782	0.2041	-4.6046	0.2977	-4.9166	0.4960
RAG	-2.0718	0.3060	-6.6604	0.3596	-2.0634	0.5218	-0.1881	0.3780	-3.7139	0.5078	-5.3277	0.8391
RAGSQ	1.5499	0.1373	3.7428	0.1522	2.4025	0.2450	1.1097	0.1769	3.4668	0.2170	4.5152	0.3568
SEX	-0.2593	0.0092	-0.0565	0.0099	-0.6174	0.0289	-0.1210	0.0201	-0.0971	0.0185	0.4567	0.0341
DI	-0.0272	0.0262	0.0901	0.0168	0.1705	0.0602	-0.1277	0.0430	0.3501	0.0402	0.3537	0.0657
OP	-0.1000	0.0144	0.1143	0.0191	0.3318	0.0449	0.0242	0.0366	0.2072	0.0296	0.3862	0.0496
CA	0.5851	0.0092	0.8364	0.0258	1.8688	0.0467	1.0402	0.0349	1.5772	0.0309	1.3949	0.0443
LV	1.2564	0.0407	0.9586	0.0740	1.1024	0.0990	0.8965	0.0259	1.2942	0.0551	1.4362	0.1772
RN	1.0298	0.0361	0.9586	0.0318	1.5581	0.0702	0.6505	0.0412	1.6787	0.0420	1.4506	0.0577
CE	-0.0221	0.0400	-0.6970	0.0305	0.3764	0.0591	-0.4242	0.0824	0.0921	0.0657	0.4479	0.0916
HY	-0.3215	0.0467	-0.0427	0.0218	-0.1194	0.1018	-0.1737	0.0736	-0.1337	0.0618	-0.0633	0.1163
CV	0.3175	0.0118	0.3192	0.0097	0.7138	0.0305	0.5685	0.0226	0.7724	0.0188	0.8915	0.0318
PH1	0.8905	0.0108	0.4851	0.0147	1.1647	0.0401	0.5078	0.0264	1.0110	0.0263	1.0662	0.0423
PH2	1.3003	0.0186	0.8945	0.0343	1.5354	0.0800	0.5598	0.0463	1.4630	0.0545	1.6150	0.0845
PH3M	1.5546	0.0307	1.2319	0.0715	2.1298	0.1384	0.7163	0.0638	1.9491	0.0945	1.9744	0.1628
PU1	0.4014	0.0125	0.3670	0.0161	0.5563	0.0395	0.2703	0.0267	0.5007	0.0252	0.7208	0.0389
PU2	0.7303	0.0237	0.6878	0.0381	1.0727	0.0727	0.4299	0.0509	0.8482	0.0498	1.0602	0.0766
PU3M	0.7999	0.0287	0.9325	0.0753	1.3039	0.1118	0.4267	0.0799	1.2691	0.0786	1.5561	0.1256
TRIN	-0.2505	0.0292	-0.1440	0.0353	0.6729	0.1012	0.3272	0.0622	0.6357	0.0736	0.2013	0.1316
PL1	0.1639	0.0158	0.1246	0.0157	0.1131	0.0377	0.1974	0.0297	0.2120	0.0248	0.2379	0.0404
PL2	0.2254	0.0418	0.2646	0.0388	0.1614	0.0778	0.3439	0.0705	0.2968	0.0537	0.4307	0.0839
PL3M	0.1770	0.0989	0.2803	0.0871	-0.1251	0.1570	0.3168	0.1550	0.4594	0.0995	0.4725	0.1783
TOTAL NUM	222,229		238,401		270,607		52,534		461,326		271,619	
DEATHS	93,522		64,594		5,542		18,040		13,703		4,922	
MODEL CHISQ	25,026		12,188		7,273		5,175		16,023		8,032	

Table 3.2

PARAMETER ESTIMATES(EST) AND STANDARD ERRORS(SE) FROM THE 1988 MODEL
APPLIED TO THE LAST DISCHARGES FOR 1986

CONDITIONS	GY		HL		HM		HS		ME		OP	
VARIABLES	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE
INTERCEPT	-6.0902	1.4498	-3.4160	0.2212	-1.6133	0.1692	-0.5198	0.1701	-2.5712	0.2549	-3.7309	0.2242
RAG	-5.5378	2.5669	-4.2268	0.3845	-2.4500	0.2892	-3.1937	0.2987	-1.1829	0.4326	-5.0932	0.3922
RAGSQ	4.7783	1.1535	3.1875	0.1673	2.0516	0.1233	2.5477	0.1310	1.5576	0.1840	3.9324	0.1723
SEX			-0.3070	0.0130	-0.2495	0.0092	-0.0478	0.0087	-0.4780	0.0163	-0.4855	0.0193
DI	0.1866	0.3101	0.2941	0.0250	-0.0197	0.0160	0.1450	0.0158	0.0318	0.0342	0.3539	0.0365
OP	0.5395	0.2405	0.1872	0.0207	0.0077	0.0120	-0.1629	0.0144	0.0252	0.0287	0.3840	0.0315
CA	2.2193	0.1759	1.4997	0.0255	0.8415	0.0212	0.6057	0.0259	1.6491	0.0208	1.9165	0.0288
LV	1.6894	0.6300	1.1551	0.0807	0.8547	0.0438	1.1809	0.0751	0.9253	0.0716	1.5156	0.0806
RN	2.6680	0.2904	1.2739	0.0302	0.7806	0.0164	0.8464	0.0253	0.6618	0.0312	1.6090	0.0468
CE	0.9116	0.3657	0.0700	0.0454	-0.1465	0.0332	-0.4865	0.0385	-0.2090	0.0328	0.2731	0.0516
HY	-0.5363	0.5140	-0.1274	0.0348	-0.3400	0.0270	-0.3097	0.0243	-0.2524	0.0613	0.0238	0.0638
CV	1.3407	0.1327	0.5839	0.0133	0.1184	0.0092	0.2506	0.0090	0.6640	0.0177	1.0189	0.0195
PH1	1.0216	0.2113	0.9189	0.0161	0.6290	0.0106	0.4733	0.0130	0.5411	0.0194	0.9992	0.0292
PH2	1.6429	0.5046	1.4469	0.0310	0.9750	0.0166	0.8402	0.0282	0.8648	0.0347	1.5330	0.0602
PH3M			1.9382	0.0537	1.2485	0.0234	1.2165	0.0565	0.9935	0.0616	2.0814	0.1047
PU1	1.1173	0.1706	0.4277	0.0188	0.3470	0.0128	0.3501	0.0151	0.3306	0.0202	0.5565	0.0273
PU2	2.1093	0.2979	0.8318	0.0382	0.5611	0.0267	0.6626	0.0353	0.5036	0.0384	0.9047	0.0549
PU3M	2.2081	0.6138	0.9628	0.0702	0.7711	0.0481	0.9840	0.0650	0.6713	0.0572	1.3180	0.0858
TRIN	0.9013	0.7009	0.7265	0.0258	0.5468	0.0377	-0.3246	0.0243	0.2211	0.1395	0.7031	0.0868
PL1	0.4276	0.1768	0.1796	0.0160	0.1214	0.0133	0.1137	0.0136	0.0428	0.0233	0.0564	0.0266
PL2	0.9956	0.3936	0.2855	0.0294	0.1428	0.0298	0.2299	0.0313	0.0182	0.0546	0.1999	0.0587
PL3M	0.2168	1.1080	0.4296	0.0471	0.1918	0.0573	0.2938	0.0630	-0.2231	0.1276	0.3776	0.1113
TOTAL NUM	60,709		806,069		306,819		252,802		106,268		598,973	
DEATHS	292		27,612		71,429		98,629		25,226		12,993	
MODEL CHISQ	742		21,313		20,525		15,388		15,173		18,431	

Table 3.3

PARAMETER ESTIMATES(EST) AND STANDARD ERRORS(SE) FROM THE 1988 MODEL
APPLIED TO THE LAST DISCHARGES FOR 1986

CONDITIONS	PN		RN		SE		TR		UN	
VARIABLES	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE
INTERCEPT	-2.4297	0.1257	-5.3676	0.2513	-1.9628	0.1900	-1.2194	0.4088	-3.6987	0.0657
RAG	-1.6417	0.2157	4.0378	0.4657	-0.8787	0.3385	-1.6280	0.7616	-2.1326	0.1156
RAGSQ	1.9832	0.0927	-0.1729	0.2153	1.3268	0.1517	1.5136	0.3558	2.3068	0.0511
SEX	-0.3399	0.0087	-0.1521	0.0249	-0.1357	0.0166	-0.2379	0.0439	-0.3210	0.0051
DI	0.0955	0.0189	0.1173	0.0406	-0.0102	0.0289	0.1980	0.1100	0.1557	0.0107
OP	-0.3001	0.0106	0.1944	0.0515	-0.0513	0.0332	-0.3725	0.0878	0.2494	0.0076
CA	1.0634	0.0142	1.0241	0.0434	0.7422	0.0249	1.1083	0.1114	1.1908	0.0069
LV	0.8483	0.0480	1.5236	0.1083	0.9560	0.0634	1.1229	0.2031	1.4421	0.0190
RN	0.9741	0.0217	-0.0975	0.0366	0.8834	0.0323	1.1905	0.1593	1.0938	0.0116
CE	0.0463	0.0197	-0.1517	0.0812	-0.2689	0.0439	-0.9687	0.1333	0.0093	0.0150
HY	-0.3062	0.0315	-0.4059	0.0461	-0.3765	0.0692	-0.5217	0.1900	-0.2185	0.0183
CV	0.3822	0.0087	0.6109	0.0257	0.5128	0.0183	0.5865	0.0477	0.6784	0.0053
PH1	0.7077	0.0107	0.3839	0.0296	0.5894	0.0203	0.0373	0.0718	0.8865	0.0069
PH2	1.0172	0.0193	0.6771	0.0504	0.7663	0.0367	0.4404	0.1499	1.3351	0.0135
PH3M	1.2355	0.0334	0.8575	0.0795	1.0428	0.0657	0.7899	0.3126	1.6613	0.0244
PU1	0.5472	0.0115	0.3206	0.0310	0.3753	0.0205	0.1126	0.0720	0.4908	0.0063
PU2	0.8525	0.0231	0.6637	0.0561	0.6278	0.0369	0.2373	0.1725	0.8060	0.0106
PU3M	1.0659	0.0374	0.7923	0.0922	0.8401	0.0550	0.8693	0.2744	0.8532	0.0140
TRIN	0.1941	0.0435	0.1664	0.0511	0.4250	0.0740	-0.1804	0.1057	0.4715	0.0173
PL1	0.2260	0.0135	0.1230	0.0347	0.1273	0.0238	-0.0378	0.0724	0.1093	0.0077
PL2	0.1862	0.0334	0.4177	0.0799	0.2285	0.0558	0.3079	0.1735	0.1382	0.0181
PL3M	0.3574	0.0720	0.6154	0.1578	0.4217	0.1292	-0.6078	0.4822	0.0787	0.0385
TOTAL NUM	338,897		34,173		73,283		11,730		2,229,542	
DEATHS	86,566		13,299		26,783		3,326		190,843	
MODEL CHISQ	40,378		6,793		7,093		688		150,640	

Table 4

Comparison
of 1986 and 1987
Parameter Estimates

Table 4.1

Diagnostic Category: Cancer(CA)			
VARIABLES		**Coefficients**	
		1986	**1987**
Names	1987 Average Case		
INTERCEPT	1	-0.694	-0.959
RAG	1.134	-2.072	-1.633
RAGSQ	1.286	1.550	1.350
SEX	0.487	-0.259	-0.240
DI	0.034	-0.027	-0.102
OP	0.126	-0.100	-0.056
CA	0.485	0.585	0.577
LV	0.014	1.256	1.357
RN	0.018	1.030	1.047
CE	0.014	-0.022	-0.063
HY	0.010	-0.321	-0.368
CV	0.191	0.318	0.352
PH1	0.221	0.890	0.905
PH2	0.060	1.300	1.311
PH3M	0.021	1.555	1.559
PU1	0.150	0.401	0.422
PU2	0.038	0.730	0.672
PU3M	0.260	0.800	0.800
TRIN	0.025	-0.251	-0.263
PL1	0.087	0.164	0.157
PL2	0.011	0.225	0.177
PL3M	0.002	0.177	0.127
TOTAL CASES		**222,229**	**216,565**
DEATHS		**93,522**	**89,692**
Mortality	**Average Case**	**45.1%**	**44.9%**
	Observed	**42.1%**	**41.4%**
Interhospital	**Variance**	**0.00137**	**0.00130**
MODEL CHISQ		**25,026**	**23,809**

Table 4.2

Diagnostic Category: CEREBROVASCULAR ACCIDENTS(CE)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	1.270	1.200
RAG	1.192	-6.660	-6.615
RAGSQ	1.422	3.743	3.712
SEX	0.582	-0.057	-0.048
DI	0.093	0.090	0.102
OP	0.070	0.114	0.128
CA	0.300	0.836	0.810
LV	0.003	0.959	0.967
RN	0.019	0.959	0.880
CE	0.038	-0.697	-0.628
HY	0.048	-0.043	-0.078
CV	0.382	0.319	0.353
PH1	0.107	0.485	0.467
PH2	0.015	0.895	0.840
PH3M	0.003	1.232	1.220
PU1	0.081	0.367	0.381
PU2	0.011	0.688	0.659
PU3M	0.003	0.932	0.708
TRIN	0.018	-0.144	-0.047
PL1	0.093	0.125	0.121
PL2	0.012	0.265	0.176
PL3M	0.002	0.280	0.363
TOTAL CASES		238,401	240,896
DEATHS		64,594	63,407
Mortality	Average Case	29.3%	28.3%
	Observed	27.1%	26.3%
Interhospital Variance		0.00044	0.00039
MODEL CHISQ		12,188	11,842

Table 4.3

Diagnostic Category: NEUROPSYCHIATRIC/SENSORY(EY)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-5.033	-5.281
RAG	1.069	-2.063	-1.561
RAGSQ	1.143	2.402	2.230
SEX	0.580	-0.617	-0.575
DI	0.052	0.171	0.176
OP	0.074	0.332	0.356
CA	0.020	1.869	1.933
LV	0.011	1.102	0.890
RN	0.011	1.558	1.616
CE	0.052	0.376	0.207
HY	0.017	-0.119	-0.042
CV	0.177	0.714	0.680
PH1	0.042	1.165	1.017
PH2	0.006	1.535	1.696
PH3M	0.001	2.130	1.933
PU1	0.081	0.556	0.542
PU2	0.012	1.073	0.950
PU3M	0.004	1.304	1.473
TRIN	0.008	0.673	0.517
PL1	0.146	0.113	0.146
PL2	0.029	0.161	0.141
PL3M	0.009	-0.125	0.070
TOTAL CASES		270,607	245,185
DEATHS		5,542	5,633
Mortality	Average Case	1.14%	1.27%
	Observed	2.05%	2.30%
Interhospital	Variance	0.00005	0.00006
MODEL CHISQ		7,273	7,524

Table 4.4

Diagnostic Category: GASTROINTESTINAL CATASTROPHES(GC)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-2.478	-2.309
RAG	1.124	-0.188	-0.470
RAGSQ	1.263	1.110	1.233
SEX	0.544	-0.121	-0.118
DI	0.061	-0.128	-0.164
OP	0.081	0.024	0.005
CA	0.083	1.040	1.067
LV	0.175	0.896	0.909
RN	0.062	0.651	0.680
CE	0.017	-0.424	-0.507
HY	0.019	-0.174	-0.304
CV	0.249	0.568	0.571
PH1	0.154	0.508	0.443
PH2	0.043	0.560	0.591
PH3M	0.02	0.716	0.575
PU1	0.155	0.270	0.292
PU2	0.034	0.430	0.490
PU3M	0.013	0.427	0.520
TRIN	0.022	0.327	0.313
PL1	0.112	0.197	0.143
PL2	0.017	0.344	0.174
PL3M	0.003	0.317	0.145
TOTAL CASES		52,534	52,907
DEATHS		18,040	18,329
Mortality	Average Case	32.5%	32.4%
	Observed	34.3%	34.6%
Interhospital	Variance	0.00232	0.00229
MODEL CHISQ		5,175	5,215

Table 4.5

Diagnostic Category: GASTROINTESTINAL DISEASE(GI)			
		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-4.605	-3.563
RAG	1.127	-3.714	-5.535
RAGSQ	1.270	3.467	4.257
SEX	0.558	-0.097	-0.124
DI	0.045	0.350	0.268
OP	0.093	0.207	0.246
CA	0.026	1.577	1.640
LV	0.013	1.294	1.373
RN	0.013	1.679	1.490
CE	0.016	0.092	0.097
HY	0.021	-0.134	-0.148
CV	0.228	0.772	0.771
PH1	0.046	1.011	1.007
PH2	0.006	1.463	1.458
PH3M	0.001	1.949	1.872
PU1	0.087	0.501	0.526
PU2	0.013	0.848	0.999
PU3M	0.003	1.269	1.067
TRIN	0.006	0.636	0.670
PL1	0.117	0.212	0.218
PL2	0.018	0.297	0.380
PL3M	0.004	0.459	0.297
TOTAL CASES		461,326	451,765
DEATHS		13,703	13,776
Mortality	Average Case	1.8%	1.8%
	Observed	3.0%	3.0%
Interhospital	Variance	0.00004	0.00004
MODEL CHISQ		16,023	16,232

Table 4.6

Diagnostic Category: UROLOGIC DISEASE(GU)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-4.917	-4.723
RAG	1.120	-5.328	-5.528
RAGSQ	1.254	4.515	4.469
SEX	0.157	0.457	0.593
DI	0.039	0.354	0.454
OP	0.080	0.386	0.149
CA	0.038	1.395	1.430
LV	0.002	1.436	1.422
RN	0.017	1.451	1.473
CE	0.013	0.448	0.586
HY	0.015	-0.063	-0.012
CV	0.175	0.892	0.933
PH1	0.040	1.066	1.152
PH2	0.005	1.615	1.599
PH3M	0.000	1.974	0.000
PU1	0.078	0.721	0.636
PU2	0.011	1.060	1.087
PU3M	0.003	1.556	1.589
TRIN	0.006	0.201	0.646
PL1	0.119	0.238	0.165
PL2	0.017	0.431	0.491
PL3M	0.004	0.473	0.834
TOTAL CASES		271,619	277,784
DEATHS		4,922	4,634
Mortality	Average Case	0.9%	0.8%
	Observed	1.8%	1.7%
Interhospital	Variance	0.00006	0.00005
MODEL CHISQ		8,032	7,689

Table 4.7

Diagnostic Category: GYNECOLOGIC DISEASE(GY)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-6.090	-9.179
RAG	1.091	-5.538	
RAGSQ	1.190	4.778	2.312
SEX	1		
DI	0.025	0.187	0.984
OP	0.038	0.540	0.132
CA	0.012	2.219	2.184
LV	0.002	1.689	1.887
RN	0.005	2.668	2.230
CE	0.009	0.912	0.347
HY	0.012	-0.536	0.307
CV	0.096	1.341	1.340
PH1	0.012	1.022	1.681
PH2	0.001	1.643	2.903
PH3M	0		
PU1	0.037	1.117	0.976
PU2	0.004	2.109	1.108
PU3M	0.001	2.208	1.559
TRIN	0.001	0.901	1.358
PL1	0.062	0.428	-0.305
PL2	0.006	0.996	0.626
PL3M	0	0.217	
TOTAL CASES		60,709	61,870
DEATHS		292	273
Mortality	Average Case	0.2%	0.2%
	Observed	0.5%	0.4%
Interhospital	Variance	0.00003	0.00003
MODEL CHISQ		742	667

Table 4.8

Diagnostic Category: LOW-RISK HEART DISEASE(HL)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-3.416	-3.165
RAG	1.132	-4.227	-4.678
RAGSQ	1.281	3.188	3.381
SEX	0.550	-0.307	-0.298
DI	0.061	0.294	0.299
OP	0.093	0.187	0.200
CA	0.020	1.500	1.509
LV	0.003	1.155	1.227
RN	0.016	1.274	1.184
CE	0.019	0.070	0.035
HY	0.038	-0.127	-0.170
CV	0.517	0.584	0.544
PH1	0.090	0.919	0.880
PH2	0.012	1.447	1.440
PH3M	0.003	1.938	2.035
PU1	0.078	0.428	0.456
PU2	0.011	0.832	0.861
PU3M	0.003	0.963	1.195
TRIN	0.036	0.726	0.673
PL1	0.171	0.180	0.190
PL2	0.035	0.286	0.255
PL3M	0.011	0.430	0.426
TOTAL CASES		806,069	818,849
DEATHS		27,612	27,786
Mortality	Average Case	2.5%	2.4%
	Observed	3.4%	3.4%
Interhospital	Variance	0.00002	0.00002
MODEL CHISQ		21,313	21,104

Table 4.9

Diagnostic Category: SEVERE CHRONIC HEART DISEASE (HM)			
VARIABLES		**Coefficients**	
		1986	**1987**
Names	1987 Average Case		
INTERCEPT	1	-1.613	-1.958
RAG	1.187	-2.450	-1.776
RAGSQ	1.409	2.052	1.735
SEX	0.551	-0.249	-0.237
DI	0.102	-0.020	-0.047
OP	0.187	0.008	0.003
CA	0.034	0.841	0.803
LV	0.008	0.855	0.711
RN	0.066	0.781	0.726
CE	0.020	-0.146	-0.081
HY	0.033	-0.340	-0.399
CV	0.594	0.118	0.080
PH1	0.202	0.629	0.633
PH2	0.061	0.975	0.951
PH3M	0.028	1.249	1.173
PU1	0.121	0.347	0.321
PU2	0.022	0.561	0.532
PU3M	0.006	0.771	0.654
TRIN	0.011	0.547	0.461
PL1	0.118	0.121	0.109
PL2	0.021	0.143	0.122
PL3M	0.005	0.192	0.205
TOTAL CASES		**306,819**	**311,444**
DEATHS		**71,429**	**70,762**
Mortality	**Average Case**	**21.1%**	**20.6%**
	Observed	**23.3%**	**22.7%**
Interhospital	**Variance**	**0.00037**	**0.00032**
MODEL CHISQ		**20,525**	**19,097**

Table 4.10

Diagnostic Category: SEVERE ACUTE HEART DISEASE(HS)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-0.520	-0.386
RAG	1.156	-3.194	-3.497
RAGSQ	1.336	2.548	2.678
SEX	0.482	-0.048	-0.038
DI	0.083	0.145	0.174
OP	0.108	-0.163	-0.153
CA	0.028	0.606	0.556
LV	0.003	1.181	1.032
RN	0.029	0.846	0.817
CE	0.015	-0.486	-0.504
HY	0.033	-0.310	-0.286
CV	0.675	0.251	0.252
PH1	0.137	0.473	0.426
PH2	0.023	0.840	0.801
PH3M	0.006	1.217	1.172
PU1	0.083	0.350	0.357
PU2	0.013	0.663	0.633
PU3M	0.004	0.984	0.977
TRIN	0.043	-0.325	-0.448
PL1	0.105	0.114	0.110
PL2	0.017	0.230	0.150
PL3M	0.005	0.294	0.372
TOTAL CASES		252,802	246,665
DEATHS		98,629	94,172
Mortality	Average Case	37.7%	36.5%
	Observed	39.0%	38.2%
Interhospital	Variance	0.00062	0.00067
MODEL CHISQ		15,388	14,457

Table 4.11

Diagnostic Category: METABOLIC/ELECTROLYTE DISORDERS(ME)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-2.571	-3.205
RAG	1.209	-1.183	0.267
RAGSQ	1.462	1.558	0.835
SEX	0.639	-0.478	-0.430
DI	0.067	0.032	-0.080
OP	0.088	0.025	0.024
CA	0.164	1.649	1.617
LV	0.010	0.925	0.866
RN	0.057	0.662	0.642
CE	0.082	-0.209	-0.264
HY	0.019	-0.252	-0.200
CV	0.249	0.664	0.625
PH1	0.176	0.541	0.544
PH2	0.040	0.865	0.776
PH3M	0.012	0.993	1.018
PU1	0.165	0.331	0.317
PU2	0.036	0.504	0.425
PU3M	0.015	0.671	0.624
TRIN	0.003	0.221	0.326
PL1	0.124	0.043	0.045
PL2	0.019	0.018	0.058
PL3M	0.004	-0.223	-0.116
TOTAL CASES		106,268	105,282
DEATHS		25,226	26,485
Mortality	Average Case	20.8%	21.8%
	Observed	23.7%	25.2%
Interhospital	Variance	0.00206	0.00216
MODEL CHISQ		15,173	14,966

Table 4.12

Diagnostic Category: MUSCULOSKELETAL/SKIN CONDITIONS(OP)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-3.731	-3.313
RAG	1.121	-5.093	-5.814
RAGSQ	1.257	3.932	4.244
SEX	0.666	-0.485	-0.469
DI	0.059	0.354	0.366
OP	0.066	0.384	0.463
CA	0.024	1.916	1.885
LV	0.004	1.516	1.573
RN	0.010	1.609	1.641
CE	0.023	0.273	0.295
HY	0.017	0.024	0.046
CV	0.170	1.019	0.985
PH1	0.031	0.999	1.058
PH2	0.004	1.533	1.447
PH3M	0.001	2.081	2.187
PU1	0.066	0.557	0.494
PU2	0.009	0.905	0.970
PU3M	0.003	1.318	1.433
TRIN	0.004	0.703	0.866
PL1	0.123	0.056	0.041
PL2	0.018	0.200	0.086
PL3M	0.004	0.378	-0.007
TOTAL CASES		598,973	585,696
DEATHS		12,993	13,186
Mortality	Average Case	1.2%	1.2%
	Observed	2.2%	2.3%
Interhospital	Variance	0.00003	0.00004
MODEL CHISQ		18,431	18,616

Table 4.13

Diagnostic Category: PULMONARY DISEASE (PN)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-2.430	-2.601
RAG	1.191	-1.642	-1.152
RAGSQ	1.418	1.983	1.708
SEX	0.509	-0.340	-0.335
DI	0.055	0.096	0.104
OP	0.261	-0.300	-0.302
CA	0.084	1.063	1.070
LV	0.007	0.848	0.649
RN	0.031	0.974	0.849
CE	0.051	0.046	0.028
HY	0.020	-0.306	-0.299
CV	0.386	0.382	0.388
PH1	0.162	0.708	0.682
PH2	0.038	1.017	0.961
PH3M	0.012	1.235	1.227
PU1	0.134	0.547	0.530
PU2	0.028	0.852	0.818
PU3M	0.010	1.066	1.055
TRIN	0.008	0.194	0.133
PL1	0.095	0.226	0.234
PL2	0.014	0.186	0.266
PL3M	0.003	0.357	0.288
TOTAL CASES		338,897	339,986
DEATHS		86,566	87,977
Mortality	Average Case	22.3%	22.6%
	Observed	25.5%	25.9%
Interhospital	Variance	0.00078	0.00072
MODEL CHISQ		40,378	38,547

Table 4.14

Diagnostic Category: RENAL FAILURE(RN)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-5.368	-4.716
RAG	1.112	4.038	2.488
RAGSQ	1.237	-0.173	0.572
SEX	0.493	-0.152	-0.132
DI	0.117	0.117	0.118
OP	0.061	0.194	0.230
CA	0.087	1.024	0.946
LV	0.014	1.524	1.263
RN	0.137	-0.097	-0.069
CE	0.026	-0.152	-0.011
HY	0.088	-0.406	-0.345
CV	0.349	0.611	0.642
PH1	0.224	0.384	0.377
PH2	0.058	0.677	0.651
PH3M	0.022	0.857	1.037
PU1	0.189	0.321	0.324
PU2	0.049	0.664	0.416
PU3M	0.021	0.792	0.794
TRIN	0.054	0.166	0.181
PL1	0.135	0.123	0.192
PL2	0.023	0.418	0.319
PL3M	0.004	0.615	0.462
TOTAL CASES		34,173	33,325
DEATHS		13,299	12,531
Mortality	Average Case	35.9%	33.0%
	Observed	38.9%	37.6%
Interhospital	Variance	0.01353	0.01217
MODEL CHISQ		6,793	6,125

Table 4.15

Diagnostic Category: INFECTIOUS DISEASE(SE)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-1.963	-2.265
RAG	1.185	-0.879	-0.228
RAGSQ	1.404	1.327	0.967
SEX	0.578	-0.136	-0.120
DI	0.098	-0.010	-0.007
OP	0.073	-0.051	-0.053
CA	0.128	0.742	0.737
LV	0.016	0.956	0.976
RN	0.065	0.883	0.750
CE	0.041	-0.269	-0.324
HY	0.016	-0.376	-0.318
CV	0.267	0.513	0.517
PH1	0.184	0.589	0.563
PH2	0.045	0.766	0.731
PH3M	0.014	1.043	0.960
PU1	0.183	0.375	0.413
PU2	0.046	0.628	0.620
PU3M	0.019	0.840	0.796
TRIN	0.011	0.425	0.446
PL1	0.124	0.127	0.149
PL2	0.019	0.229	0.233
PL3M	0.003	0.422	0.250
TOTAL CASES		73,283	77,856
DEATHS		26,783	27,664
Mortality	Average Case	34.5%	33.7%
	Observed	36.5%	35.5%
Interhospital	Variance	0.00195	0.00168
MODEL CHISQ		7,093	6,964

Table 4.16

Diagnostic Category: SEVERE TRAUMA(TR)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-1.219	-1.498
RAG	1.161	-1.628	-1.358
RAGSQ	1.348	1.514	1.460
SEX	0.479	-0.238	-0.244
DI	0.039	0.198	-0.063
OP	0.075	-0.372	-0.249
CA	0.033	1.108	0.821
LV	0.008	1.123	1.158
RN	0.013	1.190	1.110
CE	0.048	-0.969	-0.488
HY	0.015	-0.522	-0.172
CV	0.246	0.586	0.575
PH1	0.119	0.037	0.109
PH2	0.015	0.440	0.381
PH3M	0.003	0.790	0.924
PU1	0.092	0.113	0.213
PU2	0.014	0.237	0.401
PU3M	0.004	0.869	0.810
TRIN	0.051	-0.180	-0.172
PL1	0.096	-0.038	-0.026
PL2	0.013	0.308	-0.234
PL3M	0.003	-0.608	0.252
TOTAL CASES		11,730	11,777
DEATHS		3,326	3,306
Mortality	Average Case	26.3%	26.1%
	Observed	28.4%	28.1%
Interhospital	Variance	0.00348	0.00303
MODEL CHISQ		688	621

Table 4.17

Diagnostic Category: ALL OTHER DISEASES (UN)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-3.699	-3.526
RAG	1.136	-2.133	-2.457
RAGSQ	1.290	2.307	2.435
SEX	0.581	-0.321	-0.293
DI	0.061	0.156	0.169
OP	0.122	0.249	0.240
CA	0.086	1.191	1.174
LV	0.008	1.442	1.429
RN	0.028	1.094	1.066
CE	0.032	0.009	0.019
HY	0.022	-0.219	-0.222
CV	0.275	0.678	0.660
PH1	0.081	0.886	0.918
PH2	0.014	1.335	1.327
PH3M	0.004	1.661	1.623
PU1	0.148	0.491	0.483
PU2	0.034	0.806	0.752
PU3M	0.018	0.853	0.736
TRIN	0.012	0.472	0.423
PL1	0.104	0.109	0.115
PL2	0.016	0.138	0.107
PL3M	0.003	0.079	0.086
TOTAL CASES		2,229,542	2,200,419
DEATHS		190,843	187,048
Mortality	Average Case	6.1%	6.0%
	Observed	8.6%	8.5%
Interhospital	Variance	0.00008	0.00007
MODEL CHISQ		150,640	144,234

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